

# Public Document Pack

## Health & Wellbeing Board

To:

Councillor Louisa Woodley – Chair

Dr Agnelo Fernandes – Vice-Chair

Councillor Jane Avis

Councillor Margaret Bird

Councillor Janet Campbell

Councillor Alisa Flemming

Councillor Simon Hall

Councillor Yvette Hopley

Rachel Flowers, Director of Public Health - Non-voting

Emma Leatherbarrow, Healthwatch Croydon

Guy Van-Dichele, Interim Director of Adults Social Care, Croydon Council - Non Voting

Robert Henderson, Executive Director of Children, Families and Education

Faisal Sethi, South London and Maudsley NHS Foundation Trust

Michael Bell, Croydon Health Services NHS Trust - Non-voting

Steve Phaure, Croydon Voluntary Action - Non Voting

A meeting of the **Health & Wellbeing Board** will be held on **Wednesday, 27 February 2019** at **2.00 pm** in **F10 - Town Hall**

JACQUELINE HARRIS BAKER  
Council Solicitor and Monitoring Officer  
London Borough of Croydon  
Bernard Weatherill House  
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19 February 2019

### AGENDA – PART A

**1. Apologies for Absence**

To receive any apologies for absence from any members of the Committee.

**2. Chair's Communications**

**3. Minutes of the Previous Meeting (Pages 5 - 10)**

To approve the minutes of the meeting held on 24 October 2018 as an accurate record.

**4. Disclosure of Interests**

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 to the value of which exceeds £50 or multiple gifts and/or instances of hospitality with a cumulative value of £50 or more when received from a single donor within a rolling twelve month period. 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 Democratic Services representative at the start of the meeting. The Chair will then invite Members to make their disclosure orally at the commencement of Agenda item 3. 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 of any business not on the agenda which in the opinion of the Chair, by reason of special circumstances, be considered as a matter of urgency.

**6. Public Questions**

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

Questions should be of general interest, not personal issues, and must be received in writing no later than noon on the Friday prior to the meeting.

There will be a time limit of 15 minutes for all questions and responses which will be minuted. The responses to any outstanding questions will be included as an Appendix to the minutes.

**7. Health & Wellbeing Board Workshop Feedback and Youth Plan Update (Pages 11 - 18)**

The report provides an update on three related strands of work around supporting children and young people in Croydon: the Health and Wellbeing Board (HWBB) workshop, Croydon's five year Local Transformation Plan (LTP), and the key actions to be included in Croydon's Youth Plan. (Copy attached)

**8. Director of Public Health's Annual Report - The First 1000 days**  
(Pages 19 - 40)

The report focuses on the first 1000 days of life and includes pre-pregnancy health and Adverse Childhood Experiences. (Copy attached)

**9. Health and Wellbeing Strategy** (Pages 41 - 60)

The report provides context for the attached draft Health and Wellbeing Strategy which is a document being developed by the board outlining the Borough's strategy for health and wellbeing of those living and working in Croydon. (Copy attached)

**10. Croydon Health and Care Transformation Plan and the NHS long term plan** (Pages 61 - 88)

The report provides the draft plan on page, draft outcomes framework and draft implementation plans. (Copy attached)

**11. Exclusion of the Press and Public**

The following motion is to be moved and seconded where it is proposed to exclude the press and public from the remainder 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 items 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.”

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## Health & Wellbeing Board

Meeting of held on Wednesday, 24 October 2018 at 2.00 pm in F10 - Town Hall

### MINUTES

**Present:** Councillor Louisa Woodley (Chair);  
Dr Agnelo Fernandes (NHS Croydon Clinical Commissioning Group) (Vice-Chair);  
Councillor Jane Avis  
Councillor Margaret Bird  
Councillor Janet Campbell  
Councillor Alisa Flemming  
Councillor Maggie Mansell  
Councillor Yvette Hopley  
Eleni Ioannides, Executive Director of People  
Emma Leatherbarrow, Healthwatch Croydon  
Michael Bell, Croydon Health Services NHS Trust - Non-voting  
Steve Phaure, Croydon Voluntary Action - Non Voting

**Apologies:** Rachel Flowers, Guy Van-Dichele and Faisal Sethi

### PART A

A1/18 **Minutes of the Previous Meeting**

**RESOLVED** that the minutes of the meeting held on 20 June 2018 were agreed as an accurate record.

A2/18 **Disclosure of Interests**

There were no disclosures at this meeting.

A3/18 **Urgent Business (if any)**

There was none.

A4/18 **Public Questions**

There were none.

## A5/18 **Priority Area Updates**

The Board considered a report that provided an update on the Board's priority areas and the Chair invited the Health and Wellbeing Board lead members for each area to comment further on the paragraphs they had provided for the report. The Chair added that the Children's priority area would be covered by Councillors Flemming and Campbell and the Homelessness priority area would be covered by Councillor Avis.

### **Substance Misuse**

Councillor Mansell noted that the Substance Misuse Strategy was a working progress and there was no update since the publication of the report.

### **Housing and Homelessness**

Councillor Avis noted that the Housing Strategy would be reported to the Health & Wellbeing Board on 10 April 2018 and she would request that Housing officers attended the meeting.

### **Prevention Strategy**

The Croydon Voluntary Action representative, Steve Phaure, noted that the Health Summit in March 2019 would focus on prevention, particularly in the voluntary sector. He suggested that the Board discussed the focus of the Health Summit and the prevention model at the Health & Wellbeing Board Workshop in December 2018.

### **Dementia Friendly Croydon**

Councillor Hopley noted that the focus had been on raising awareness within the borough and gathering evidence regarding dementia. Continue to work with the group and raise prevention.

Councillor Avis and Mansell noted that there were Dementia Friendly hospitals within the Borough and the needs of those with dementia had been considered when designing the new Accident & Emergency building. The Director of Education and Youth Engagement noted that every officer within the Education department had been training and schooling staff were to be trained in the near future. It was added that it would be beneficial to include an update from hospitals and schools within the report.

The Board agreed to have an update report to the meeting in June/July 2019 on awareness being raised within the Borough regarding dementia.

### **One Croydon Alliance**

The Croydon Health Services NHS Trust representative, Michael Bell, explained that the work was ongoing and suggested the Health & Wellbeing Board received a detailed update report.

### **Transformation Plan**

The Vice Chair invited the Health & Wellbeing Board Members to the Prevent Day on 20 November 2018 at the Croydon Conference Centre and noted he would circulate further details closer to the date.

**RESOLVED** – That the Board agreed to note the report.

### A6/18 **Health and Wellbeing Strategy Draft**

The Board considered the draft Health and Wellbeing Strategy and the report which provided context for the document being developed by the board outlining the Borough's five year strategy for health and wellbeing of those living and working in Croydon.

The Vice-Chair explained to the Board that the Strategy would continue to develop but it was important for it to be reported at an early stage to the Health & Wellbeing Board to gather comments and answer questions. He encouraged the Members to submit further comments or queries to the Public Health Consultant, Jack Bedeman.

Councillor Mansell noted that it would be beneficial to have an action list as part of the strategy so progress could be monitored and achievements recorded. The Croydon Health Services NHS Trust representative agreed with Councillor Mansell and suggested the Strategy have approximately 4-6 clear key outcomes/aspirations to focus on. He added that these could be developed from a similar model the Health & Wellbeing Board have in Manchester. Councillor Avis requested that one of the key outcomes be focussed on mental health.

**RESOLVED** – That the Board agreed to –

- 1) Consider the draft Health and Wellbeing Strategy (Appendix 1);
- 2) Approve the Priorities within the draft Health and Wellbeing Strategy (Appendix 1) for the final strategy to come to the January 2019 Health and Wellbeing Board for sign off;
- 3) To note the development of the health and care transformation plan which will become a delivery plan of this strategy (as set out in 3.9, appendix 3).

## A7/18 **Children's Priorities**

Councillor Flemming introduced the report and explained that it was a continuation of the ongoing work at Best Start on First 1000 Days, focusing on the critical time which shaped children as adults. It was explained that two main focusses of the Borough were to increase opportunities for young people and to encourage immunisation. It was also noted that the second youth congress had been held and was well attended. There was an extensive discussion regarding mental health and Councillor Flemming noted it was positive that young people were publicising mental health and mental wellbeing.

Councillor Campbell suggested an internal audit was conducted to gain a clear perspective of the various groups and their work contributing to mental health issues with children within the Borough; following the audit a clear plan could be established. The Vice-Chair added that if an audit was agreed then the Health & Wellbeing Board would need to ensure it was actioned.

Councillor Campbell noted it would be valuable for the Members of the Health & Wellbeing Board to attend a mental health first aid course.

The Public Health Consultant noted that youth mental health first aid was available for those who work with young people. Following the tram incident a community youth model would be provided in New Addington where training would be provided to local schools and if this was positive then it would be introduced to other areas of the Borough. The Director of Education and Youth Engagement stated that the Mayor of London had designated funding for 2000 members of schooling staff to be trained across London. He also added that a positive response had been received from young people requesting that they be trained so they could look after their peers.

The Vice-Chair noted that self-harm amongst young women was continuously increasing, especially within the Accident & Emergency department; therefore, it was important for the Health & Wellbeing Board to collaborate with local schools. The Chair agreed and added that involvement within the Board from teachers and young people should be encouraged and she would extend the invite to the next workshop in December.

The Croydon Health Service NHS Trust representative stated that violence was a public health issue and should be reflected within the priorities in the Health & Wellbeing Strategy. He noted that Croydon had the second highest rate of knife crime within London and one of the highest records of sexual exploitation in the country. The Public Health Consultant noted that a priority regarding violence would be included in the Youth Plan and the Health & Wellbeing Strategy. Councillor Flemming added that the priorities were set by the young people, these being; mental health, safety and jobs.

Councillor Hopley noted concern for immunisation as the Borough was below both the national and London average for children being immunised. Councillor Flemming explained that there was more information being distributed to parents and coffee mornings had been introduced within schools providing the opportunity for parents to receive further information and ask questions. The sessions were well attended and were having a positive impact on the immunisation figures.

**RESOLVED** – That the Board agreed to:

- 1) Approve the draft Health and Wellbeing Board children's priorities;
- 2) Agree the proposals for taking forward the priorities.

#### A8/18 **Healthwatch Update**

The Healthwatch representative, Emma Leatherbarrow, introduced the report and explained the Healthwatch Croydon contract was awarded to Help & Care in April 2018 following a competitive tendering process. The report set out a summary of what had been achieved in the first 6 months of the contract alongside the approach that would be taken to ensure local leadership and prioritisation.

In response to Councillor Bird's queries the Healthwatch representative explained that leaflets had been produced to promote the helpline and an online presence was being established. She explained that although the call centre was based in Bournemouth there was an online resource service where local information was shared for staff to use. The Chair suggested that Healthwatch engaged with the resident associations and Ward Councillors regarding the service.

**RESOLVED** – That the Board agreed to note the report.

#### A9/18 **CCG and Council Commissioning Intentions**

The report was introduced and the local priorities for Croydon, set out in Appendix 1, were highlighted.

In response to Councillor Hopley it was noted that the affected providers would be notified of the change. It was explained that there would be a focus on connecting the existing resources within the communities and strengthening these.

**RESOLVED** – That the Board agreed to:

- 1) Note the Council's strategic commissioning intentions set out in Appendix 1;
- 2) Endorse the South West London Commissioning Plans which include Croydon CCG specific intentions (Appendix 2) and note the progress on CCG plans for 2018/19 (Appendix 2B);
- 3) Note the areas where the Council and CCG are considering joint commissioning as proposed by the Joint Commissioning Executive (set out paragraph 3.14).

A10/18 **Exclusion of the Press and Public**

This was not required.

The meeting ended at 4.17 pm

<b>REPORT TO:</b>	<b>HEALTH AND WELLBEING BOARD (CROYDON)</b> <b>27 February 2019</b>
<b>SUBJECT:</b>	<b>Health and Wellbeing Board December 2018 Workshop Feedback and Youth Plan update</b>
<b>BOARD SPONSOR:</b>	Cllr Louisa Woodley, Chair of the Health and Wellbeing Board Rachel Flowers, Director of Public Health
<b>BOARD PRIORITY/POLICY CONTEXT:</b>	
Giving children and young people a better start in life is one of eight priority areas in Croydon’s draft Health and Wellbeing strategy 2018 – 2023. This report provides further information about plans to deliver this priority.	
<b>FINANCIAL IMPACT:</b>	
There are no direct financial implications arising from this report.	
There could be financial implications associated with individual commissioned activity in the future as a result of the work undertaken on the priorities detailed in this report and these will require the relevant approvals as they arise.	

## 1. RECOMMENDATIONS

1.1 The Board is asked to note the outputs of the HWBB workshop held on the 5<sup>th</sup> December 2018 on Children and Young Person’s Mental Health.

1.2 The Board is asked to approve the proposed actions within the three children’s priorities agreed by Health and Wellbeing Board in October 2018 for inclusion in the Youth Plan

1.3 The Board is asked to discuss the proposals to take forward the priorities Croydon’s draft LTP (local transformation plan) for improving Children and Young People’s Emotional Wellbeing and Mental Health.

1.4 The Board is asked to review and sign off Croydon Clinical Commissioning Group’s LTP (local transformation plan) for Children and Young People’s Emotional Wellbeing and Mental Health.

## 2. EXECUTIVE SUMMARY

2.1 This report provides an update on three related strands of work around supporting children and young people in Croydon:

2.2 **The Health and Wellbeing Board (HWBB) workshop** held in December 2018 about improving the mental health and wellbeing of children and young people.

The workshop identified key actions for mental health, which is one of the three HWBB children priorities. The workshop also shaped the priorities of Croydon's plan for transforming the emotional wellbeing and mental health of children and young people.

- 2.3 The latest iteration of **Croydon's five year Local Transformation Plan (LTP)** to improve the emotional wellbeing and mental health of children and young people.
- 2.4 The **key actions to be included in Croydon's Youth Plan** for all three of the HWBB children's priorities
  - Mental health
  - First 1000 days
  - Healthy Weight

### 3. BACKGROUND AND CONTEXT

- 3.1 The LSP (Local Strategic Partnership) has committed to a multi-agency youth plan to tackle the priorities that were identified by Young people at the Youth Congress meetings held in 2017 and 2018. Three priorities have formed the basis of the Youth Plan: opportunities and economic success, crime and safety, mental health issues and support.
- 3.2 The LSP priorities are interlinked, with a lack of employment opportunities leading to higher rates of crimes, and poor mental health leading to lower levels of economic success and greater involvement in crime. People who experience mental health problems in childhood are more likely to have mental health problems in adulthood and this will adversely affect their employment prospects, increase the likelihood of being a perpetrator or a victim of crime and is associated with lower economic success.
- 3.3 At the October 2018 HWBB meeting, the Board identified three children's priorities together with a process for developing key actions for each of these priorities. These priorities and actions develop the work of the Health and Wellbeing Strategy and are to be included in the LSP youth plan. See the HWBB report "Health and Wellbeing Board Children's Priorities" for details, including why these priorities were chosen.  
<https://democracy.croydon.gov.uk/documents/s10846/HWBB%20Report%20childrens%20priorities%20final%2012Oct18.pdf>
- 3.4 The HWBB children's priorities address one of the eight priority areas in Croydon's Health and Wellbeing strategy 2018 – 2023 of Giving children and young people a better start in life. They are:
  - **First 1,000 days** – to focus on the first 1,000 days from conception to 2 years, including improving childhood immunisations
  - **Mental wellbeing** –To improve services for children and young people across the whole pathway from promoting resilience and prevention through to crisis support, including a strong focus on vulnerable adolescents.



- **Healthy Weight** – To create an environment that enables children and families to reach and maintain a healthy weight.
- 3.5 Key actions for the **mental wellbeing** priority were discussed at the HWBB workshop of the 5<sup>th</sup> December 2018. They were reinforced and endorsed both by the Children and Young People’s Emotional Wellbeing and Mental Health partnership board and at a wider meeting that was held with councillors and senior officers on January 28<sup>th</sup> 2019.
  - 3.6 The key actions for the other two priorities were developed by their partnership groups and key leads. The draft actions for all three of the HWBB’s Children’s Priorities are shown at appendix 1.
  - 3.7 The workshop and the development of the youth plan provided an important opportunity to influence the latest iteration of **Croydon’s five year Local Transformation Plan (LTP)** to improve the emotional wellbeing and mental health of children and young people. The priorities identified at the HWBB workshop have been adopted by the plan and over the coming months will influence the details of the plan and its implementation.
  - 3.8 Croydon’s five year LTP was developed in 2015/16 and is refreshed annually. The plan is overseen and implemented by the Children and Young People’s Emotional Wellbeing and Mental Health (CYPEWMH) partnership board and NHS England requires that it is signed off by the HWBB.

#### **4. HWBB workshop and mental health priorities**

- 4.1 The workshop was held on 5<sup>th</sup> December 2018 and was organised and run by the CYPEWMH partnership board and attended by members of the HWB Board and the CYPEWMH partnership board.
- 4.2 In the first part of the event, attendees listened to the lived experiences of CYP with mental health issues, the scale of the challenge in Croydon and local plans to address them. In the second part, attendees worked together (via “pinpoint”) to develop key actions. Attendees were then invited to vote on the actions to identify priorities.
- 4.3 There was wide recognition of the complexity of mental health issues. Childhood and young adulthood is a key time for laying down the foundations of life long mental (and physical) wellbeing and there was recognition that we need to shift the focus of our efforts onto prevention. Across the whole pathway, and particularly for those needing services, the workshop attendees highlighted the importance of having CYP at the heart of Croydon’s work and the need to understand how CYP and their families and carers can navigate their way through the system.
- 4.4 Approximately 75 actions were suggested grouped into 33 areas under four themes. Following the workshop, the comments and votes were reviewed and the following overarching actions identified (see Appendix 2 for detail):

- **Pathways.** Navigating through the system with the right access at the right time in the right place. This means that children and young people who have mental health problems such as emotional disorders, eating disorder, autism and many others get the right support and help when they need it.
  - **Engagement** with children, young people, their families, schools, carers and communities. Those who have lived experience of mental health problems and families who support children and young people with mental health needs need to be at the heart of services.
  - **Strategic join up and wider work:** maximise the resilience of the population through working with non-MH services, providing information, and through improving wider determinants such as housing.
- 4.5. A subsequent meeting was held with Cllrs and Directors on January 28th 2019. The outcome was to reinforce and endorse the priorities that came out of the Health and Wellbeing Board workshop that was held on December 5th 2018.
- 4.6 These overarching priorities will determine the direction of travel over the next three years for improving mental health services for children and young people and for ensuring that there is a focus on prevention, early intervention and population resilience. They have been incorporated into Croydon's LTP (see next section for details) and it is proposed that they are included in the borough's Youth Plan. The process of taking forward this agenda is both iterative and will take time to embed.

## 5. Croydon's five year Local Transformation Plan (LTP)

- 5.1 Croydon's five year LTP (Local Transformation Plan) was developed in 2016/17 and is refreshed annually. It captures Croydon's response to the government's "Future in Mind" (March 2015) policy document. It sets out how we will meet the challenges and opportunities to enhance the emotional wellbeing and mental health services for children in Croydon. The priorities identified echo the themes set out in the recently published NHS Long Term Plan. It is about partnership working across all stakeholders. Mental Health is everyone's business.
- 5.2 The annual refresh of the LTP is required by NHS England. This entails updating the LTP using key lines of enquires designed to address service delivery and capture developments. The annual refresh of the LTP allows for input from children, young people, parents, carers and providers and other stakeholders, along with feedback on service planning and delivery.
- 5.3 The plan is overseen and implemented by the Children and Young People's Emotional Wellbeing and Mental Health (CYPEWMH) partnership board and NHS England requires that it is signed off by the HWBB.
- 5.4 As described in the previous section, the priorities for this year's refresh were developed by the HWBB workshop, the partnership board and discussion with councillors and senior officers. A detailed action plan is being developed to ensure actions required to deliver emotional wellbeing and mental health services for children and young people are captured going forward. The HWBB will continue to be involved in monitoring the delivery of the plan and it's future revisions.

- 5.5 It is recognised that achieving emotional wellbeing for children and young people is, by its very nature, complex and multi-faceted as a result of the different services, systems and structures that have evolved. To tackle this complexity, we are building on existing partnerships and services and want to develop innovative solutions to meet the challenges ahead.
- 5.6 The HWBB should note that the Croydon CCG are investing an additional £630,000 next year to focus on the delivery of the top priorities identified by the HWBB and that £50,000 of this will be allocated directly by young people themselves.
- 5.7 The development of the LTP uses the feedback we have had from the children and young people, families' carers and communities who receive these services. We are committed to further improving the engagement and participation to shape the future pattern of service delivery.

## **6. FIRST 1000 DAYS**

- 6.1 The priority actions for the first 1000 days were identified by the Director of Public Health and her team, based on her 2018 Annual Public Health Report of the same name.
- 6.2 The report highlights the key role every child's first 1000 days plays in determining their future health and development. What happens during the first 1000 days lays the foundations for every child's future. Not all the foundations are equally firm and this can be a source of inequalities.
- 6.3 The report emphasises the importance of pre pregnancy health and the contribution it makes to the first 1000 days and beyond.
- 6.4 The report highlights the risk that Adverse Childhood Experiences (ACEs), such as neglect or abuse, can lead to toxic levels of stress and have long lasting impacts. Each additional ACE that a child is exposed to increases the risk of poorer life outcomes
- 6.5 The report details that working together to ensure that children experience the best first 1000 days is a vital prevention activity that will enable us to change the future health of Croydon residents
- 6.6 The report makes 34 recommendations for action including:
- Review, revise and join up the maternal mental health pathways from the community, and primary care, through midwifery and health visiting and other partners by 2019.
  - All (100%) of midwives and health visitors in Croydon to receive training around recognising and supporting families with risk of multiple Adverse Childhood Experiences by the end of 2019.
  - 1000 front line staff in the council, NHS, police and voluntary sector to have training around Adverse Childhood Experiences, their causes and impact, in 2019

- Develop and Implement a plan of action for increasing the levels of awareness about pre pregnancy health and the importance of preparing for pregnancy by the end of 2019

## **7. HEALTHY WEIGHT**

- 7.1 The actions for Healthy Weight were identified by the co-chairs of the Joint Council and CCG Weight Management Steering Group based on the borough's three year healthy child weight action plan (2017 – 2020). The steering group now reports to the Together for Health Board and is one of the work streams supporting early prevention for type 2 diabetes.
- 7.2 There is a close relationship between the Child Healthy Weight Action Plan and the Food Poverty action plan which is focusing on work to facilitate for example 365 day food for school children and increase uptake of Healthy Start vouchers for vitamins and fresh fruit and vegetables.
- 7.3 The vision of the child healthy weight action plan is to promote an environment that enables children, young people and their families to eat well, be physically active and maintain a healthy weight.
- 7.4 The plan has four priority areas: Sugar Smart, the daily mile, community use of Parks and Green Spaces, and integrating services and targeting resources.
- 7.5 The areas covered in the action plan reflect the recognition that Childhood obesity is a complex problem and change requires system wide engagement with a multifactorial approach.
- 7.6 The Child Healthy Weight Action plan is being reviewed in light of the Annual Public Health Report on the first 1000 days and the recently published (December 2018) London Mayor's Food strategy.

## **8. CONCLUSION AND NEXT STEPS**

- 8.1 This report describes the key actions identified for each of the HWBB children's priorities. The Board is asked approve these actions for submission to the LSP for inclusion in the borough's Youth Plan.
- 8.2 The report also outlines the key messages and actions from the LTP. The Board is asked to approve the plan. Comments made by the Board will be incorporated into the detailed action planning that will influence the implementation over the next few months.
- 8.3 Finally, the report proposes that an update on progress is brought to the board on a regular basis.

## **9. CONSULTATION**

- 9.1 Level and type of consultation varied by priority however the actions plans and priorities draw on the views of the young people who ran and attended Croydon's Youth Congresses held in 2017 and 2018, the 2018 takeover day of the council by young people, and the young people, families, carers and communities who receive these services. Improving engagement and participation is one of the priority actions proposed within this report.

## **10. SERVICE INTEGRATION**

- 10.1 Some of the action plans recommend stronger strategic partnership working. However, there are no implications for service integration at this stage,

## **11. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS**

- 11.1 There are no direct financial implications arising from this report
- 11.2 There could be financial implications associated with individual commissioned activity in the future as a result of the work undertaken on the priorities

Approved by: Mirella Peters, Head of HWA Finance, Croydon Council

## **12. LEGAL CONSIDERATIONS**

- 12.1 There are no legal considerations arising from this report.

Approved by: Sandra Herbert, Head of Corporate Law for and on behalf of Jacqueline Harris-Baker the Council Solicitor & Director of Democratic & Legal Services

## **13. HUMAN RESOURCES IMPACT**

- 13.1 There are no direct Human Resources implications arising from this report for Croydon Council employees.

Approved by: Debbie Calliste, Head of HR for Health, Wellbeing and Adults, on behalf of the Director of Human Resources

## **14. EQUALITIES IMPACT**

- 14.1 This report asks the Board to approve actions within priorities that were chosen in part because they can help to reduce inequalities which disproportionately affect people with protected characteristics. Evidence shows that young people with protected characteristics are disproportionately impacted by poor mental and physical health. They are more likely to suffer from mental health issues and be overweight or obese.

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**CONTACT OFFICER:** Rachel Flowers, Director of Public Health, Croydon Council,  
[Rachel.flowers@croydon.gov.uk](mailto:Rachel.flowers@croydon.gov.uk) 020 8726 5596

<b>REPORT TO:</b>	<b>HEALTH AND WELLBEING BOARD (CROYDON)</b> <b>27 February 2019</b>
<b>SUBJECT:</b>	<b>2018 Annual Public Health Report Recommendations</b>
<b>BOARD SPONSOR:</b>	<i>Rachel Flowers, Director of Public Health</i>
<b>BOARD PRIORITY/POLICY CONTEXT:</b>	
<p>The Director of Public's Health 2018 Annual Public Health Report was presented to Council Cabinet (November 2018) and the CCG Governing body (January 2019).</p> <p>The Report's focus is on the first 1000 days of life and includes pre pregnancy health and Adverse Childhood Experiences.</p> <p>Implementation of the Report's recommendations will support the delivery of the three Health and Wellbeing Board children's priorities, in particular the first 1000 days and healthy weight.</p>	
<b>FINANCIAL IMPACT:</b>	
<p>There are no direct financial implications arising from this report.</p> <p>There could be financial implications associated with individual commissioned activity in the future as a result of the work undertaken on the priorities detailed in this report and these will require the relevant approvals as they arise.</p>	

<b>RECOMMENDATIONS</b>
<p>The Public Health report recommends that the Health and Wellbeing Board take the responsibility for the oversight of the 34 recommendations and the monitoring of their implementation and impact.</p> <p>The HWBB is asked to:</p> <ul style="list-style-type: none"> <li>• note the arrangements that are already in place to support implementation of the recommendations</li> <li>• support the creation of a task and finish group to monitor implementation progress</li> </ul>

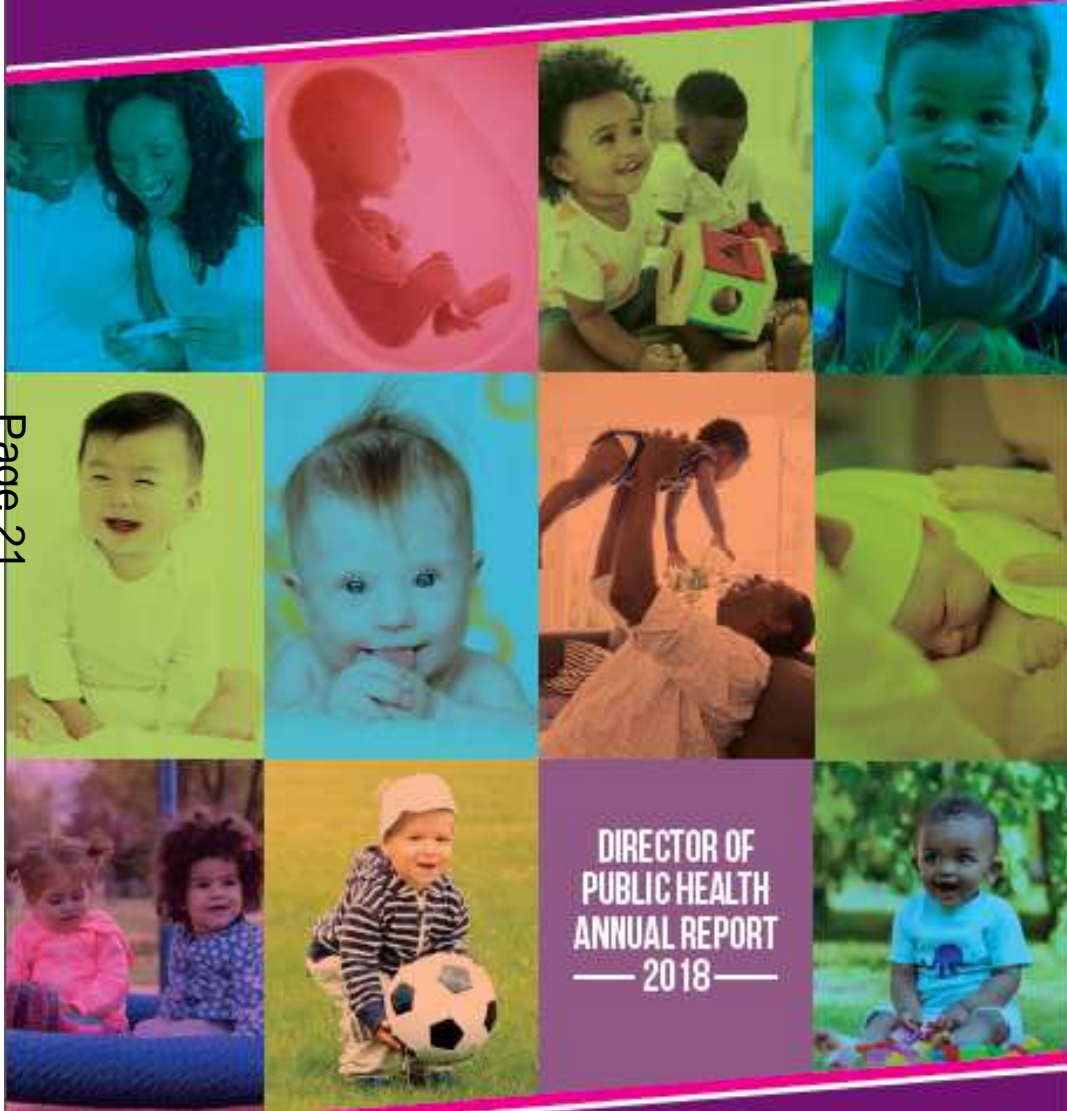
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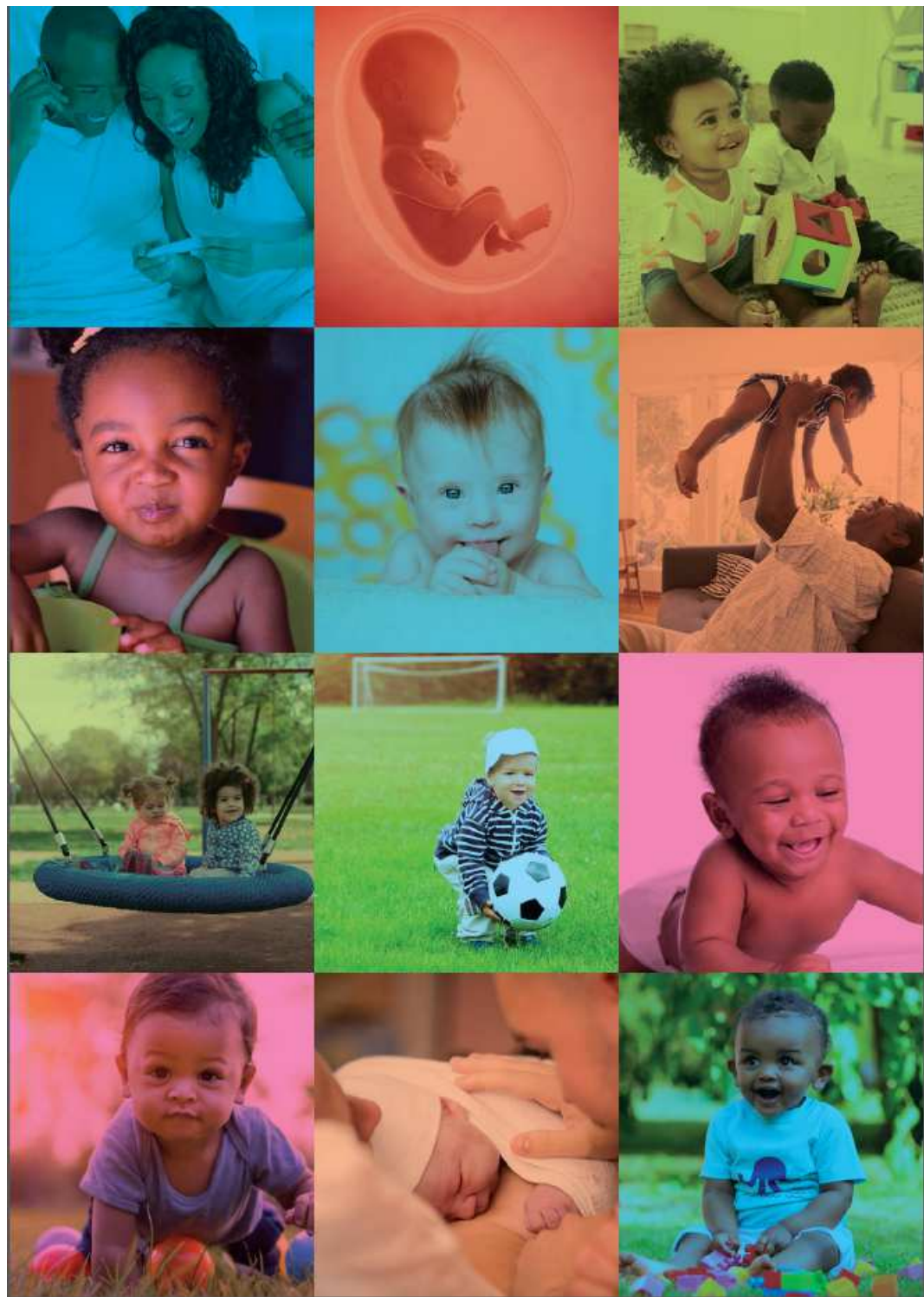
# WE ARE CROYDON

EARLY EXPERIENCES LAST A LIFE TIME

The first 1000 days from conception to the age of 2



DIRECTOR OF  
PUBLIC HEALTH  
ANNUAL REPORT  
— 2018 —



# The importance of first 1000 days of life

OUR FUTURE

- Nearly **6000** babies are born each year in Croydon
- ‘What a child experiences during the early years lays down a foundation for the whole of their life’ (Marmot 2010)



Early Experiences Last a Lifetime



# The opportunity to make a difference for the 6000 babies born in Croydon each year

OUR FUTURE

**1100** born into poverty

**1300** will not be breastfed at 6 to 8 weeks

**1500** may not receive 2 MMR doses

**2000** babies unplanned

**1500** may not be school ready

**1300** will be overweight or obese when they start school



**1700** may have tooth decay by 5

Over **350** mothers smoked in pregnancy

Between **525** and **1600** mothers with mild to moderate depressive illness

**700** live in households where there is harmful or hazardous drinking

# Focus of today's presentation



OUR FUTURE

- Taking forward the recommendations in the 2018 Annual Public Health Report
  - Lead group
  - Incorporating the APHR recommendations into action and delivery plans
- Highlight areas where there is no existing group to lead delivery of the recommendations
- Health and Wellbeing Board's oversight function



# A question and three key principles to keep in mind

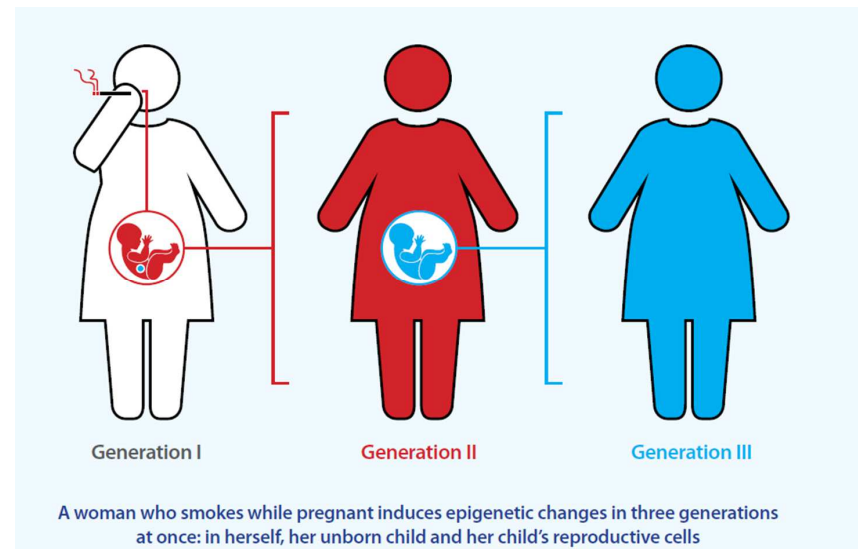
OUR FUTURE

I would like us all to ask ourselves: ‘Do I know what impacts on the health of children in their first 1000 days of life? And what can I, or my organisation, do to reduce inequalities?’

**Know your role:** everyone can make a difference

**Health in all policies:** create the right conditions for good health

**Breaking the inequalities cycle:** helping the babies of today helps the next generation



# Governance arrangements for the recommendations

OUR FUTURE

Health and Wellbeing Board to have oversight of the implementation of the recommendations from the APHR. What does this oversight mean?

Health and Wellbeing Board

Children, Young People and Families Partnership Board

? Health and Wellbeing Board  
APHR Task and Finish Group

Lead groups and programmes

# 4 key recommendations



OUR FUTURE

Page 27

Recommendation	In progress	Lead group, key partners /programmes
Review, revise and join up the maternal mental health pathways		New: Perinatal mental health sub group and scoping document
100% of midwives and health visitors in Croydon to receive training around recognising and supporting families with risk of multiple ACEs 1000 front line staff in the council, NHS, police and voluntary sector to have ACES training, their causes and impact		New: ACEs working group
Increase levels of awareness about pre pregnancy health and the importance of preparing for pregnancy		? Lead group. This is not just a Croydon issue

# The setting for the first 1000 days



Recommendation	In progress	Lead group, key partners /programmes
<p>Page 28</p> <p>1. Ensure training raises awareness among staff of:</p> <ul style="list-style-type: none"> <li>the importance of the first 1000 days and <b>pre pregnancy health</b></li> <li>the impact of wider determinants such as poverty</li> <li>how they can make a difference in their role for children and their families</li> </ul>		<p>Early Help (and partners) training programmes</p> <p>Children’s Services</p> <p>Gateway Services</p> <p>Primary Care</p>
<p>2. Use population and community level intelligence at borough and locality level to target resources and services to those individuals and communities most in need</p>		<p>Population Health Management approach</p> <p>Children’s JSNA</p> <p>Council Operating model</p> <p>Early Help and Gateway Services</p>



# Young parents

OUR FUTURE

Recommendation	In progress	Lead group, key partners /programmes
3. Provide senior strategic support from across the partnership to the borough's teenage pregnancy action plan		Partnership teenage pregnancy action plan
4. Increase awareness among young people of all sexes of the importance of being healthy before pregnancy and <b>planning pregnancies</b> :		Healthy Schools Action Plan, Implementation of the new SRE programme from 2020
5. Ensure the findings of Croydon's Vulnerable Adolescent Mental Health deep dive are acted upon to identify when, where and how to provide support to children and teenagers		CYP Emotional Wellbeing and Mental Health Board CSCB

# Pre-pregnancy health and planning for pregnancy

*"You read up on all the stuff about being healthy during a pregnancy, but nothing really before that. It never occurred to me, we just started trying and a few months later, it happened".<sup>(13)</sup>*

Recommendation	In progress	Lead group, key partners /programmes
<p>6. All agencies to maximise their use of existing opportunities to raise awareness of the importance for both parents <b>of planning for pregnancy and addressing health issues before becoming pregnant.</b></p>		<p>? Lead group Partnership Teenage Pregnancy Action Plan SRE in schools</p>
<p>7. Use existing and new media to <b>promote pre-pregnancy health messages</b>, particularly about smoking and being overweight or obese for people living and working in Croydon</p>		<p>Joint Healthy Weight Steering Group Just be and Livewell</p>

Page 50

# Smoking and pregnancy



Recommendation	In progress	Lead group, key partners /programmes
8. Develop a pathway for pregnant smokers and their partners into smoking cessation support that is <b>opt out rather than opt in</b>		Live Well Public Health CHS
9. Identify the groups continuing to smoke through pregnancy and review the evidence base to identify the best approaches for helping them to stop smoking		Live Well Public Health
10. Develop a smoke free homes programme with social and private landlords		Live Well Public Health

# Parental weight, diet and nutrition



Page 32

Recommendation	In progress	Lead group, key partners /programmes
<p>11. Continue to provide senior strategic support to the partnership’s Healthy Weight steering group, and <b>ensure its work plan includes pre pregnancy health.</b></p>		<p>Partnership Healthy Weight Steering Group</p>
<p>12. Ensure that all programmes that promote pre-pregnancy health include key messages around the importance of being a healthy weight and having a healthy diet before pregnancy.</p>		<p>Partnership Healthy Weight Steering Group Live Well / Just Be Primary Care</p>
<p>13. Incorporate the recommendations of the London Mayor’s Food Strategy into local plans</p>		<p>Partnership Healthy Weight steering group</p>

# Mental health in pregnancy and beyond



Page 33

Recommendation	In progress	Lead group, key partners /programmes
14. Review, revise and join up the maternal mental health pathways from the community, and primary care, through midwifery and health visiting and other partners		<b>New:</b> Peri-natal mental health steering group and scoping document
15. Ensure all staff have the skills to identify parents and prospective parents with potential mental health concerns and are able support and signpost them appropriately		<b>New:</b> Peri-natal mental health steerin group ACEs working group EH strategy
16. Ensure that all programmes that promote pre-pregnancy health address mental health concerns before pregnancy		? Lead group

# Relationships, social support and excess stress during pregnancy

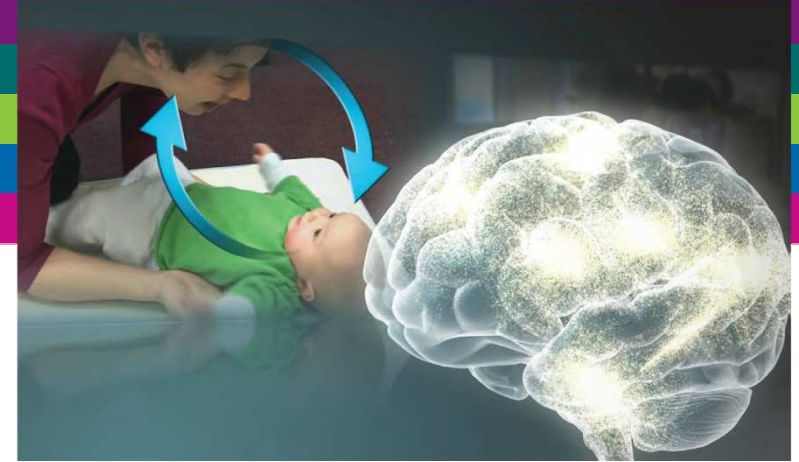


Page 34

Recommendation	In progress	Lead group, key partners /programmes
17. Review the effectiveness of the current arrangements for identifying women who need more social support and make recommendations to address any system wide gaps that are identified		<b>New:</b> ACEs working group EH steering group
18. See ACES recommendation		
19. See ACES recommendation		



# Child development and stress in infancy



Page 35

Recommendation	In progress	Lead group, key partners /programmes
Ensure maximum delivery of the health visiting development checks, from the antenatal visit to the 2 year check		Commissioning and contract monitoring
Ensure all parents who may need additional support know what options are on offer and where to access them		Early Help Steering Group <b>New:</b> ACEs working group
All practitioners working with children and families understand what toxic stress is, its sources and what impact it may have		<b>New:</b> ACEs working group

# Immunisation rates in Croydon



Page 36

Recommendation	In progress	Lead group, key partners /programmes
All GP practices to reach 95% of MMR immunisations		CCG Health protection forum Child health steering group
Implement comprehensive vaccination for vulnerable groups		CCG Health protection forum Child health steering group



# Breastfeeding in Croydon



Recommendation	In progress	Lead group, key partners /programmes
Reset targets for increasing breastfeeding rates at 6 to 8 weeks and 6 months across the Borough and within particular localities		Commissioning and contract monitoring
Achieve level 3 of the UNICEF Baby Friendly award		New: Breastfeeding working group
Turn Croydon into a breastfeeding friendly Borough, so women feel at ease to breastfeed when they are out and about		Health and Wellbeing Board task and Finish group?

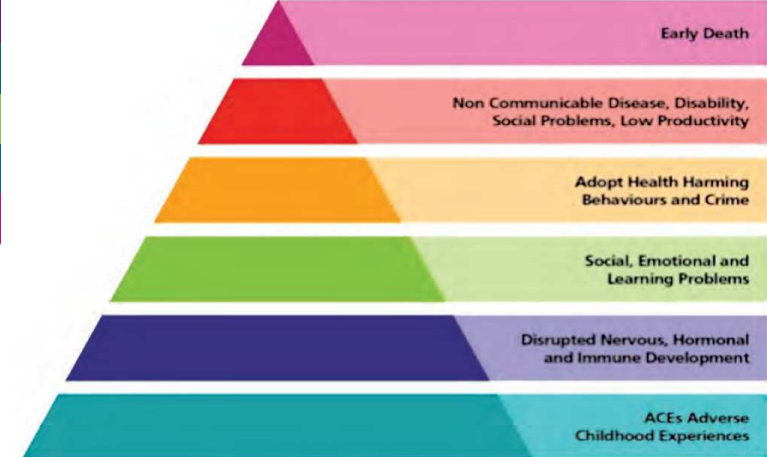
# Child healthy weight



Page 38

Recommendation	In progress	Lead group, key partners /programmes
Review the Child Healthy Weight action plan in light of this report and amend to increase its focus on the first 1000 days		Partnership healthy weight steering group
All families with young children, nurseries and other early years' providers to be encouraged to become Sugar Smart and their pledges monitored.		Healthy Early Years programme Sugar Smart
Increase the numbers of young children who go to the dentist		Public Health team and LDC, Health visiting
Increase the numbers of eligible families claiming their healthy start vouchers for fruit and vegetables and vitamins from pregnancy		Food poverty action plan and healthy Start working group

# ACEs in Croydon



Page 39

Recommendation	In progress	Lead group, key partners /programmes
Working as a partnership, develop evidence based actions to champion the importance of ACEs and the first 1000 days, and to identify and support children and families most vulnerable to ACEs		New: ACEs working group Early Help
All (100%) of midwives and health visitors in Croydon to receive training around recognising and supporting families with risk of multiple ACEs		New: ACEs working group
1000 front line staff in the council, NHS police and voluntary sector to have training around ACEs, their causes and impact		New: ACES working group

# Next Steps



OUR FUTURE

- Members of the HWBB to sign up to the key principles
- All organisations represented on the HWBB to support delivery of the recommendations
- To agree preferred governance and reporting arrangements
  - Task and finish group

<b>REPORT TO:</b>	<b>HEALTH AND WELLBEING BOARD (CROYDON)</b> <b>27 February 2019</b>
<b>SUBJECT:</b>	<b>Croydon Health and Wellbeing Strategy</b>
<b>BOARD SPONSOR:</b>	<i>Cllr Louisa Woodley, Chair of the Health and Wellbeing Board</i> <i>Guy Van Dichele, Executive Director Health Wellbeing and Adults</i>  <i>Agnelo Fernandes, Croydon CCG</i>
<b>BOARD PRIORITY/POLICY CONTEXT:</b>	
<ul style="list-style-type: none"> <li>• <i>This is the final draft of Croydon's Joint Health and Wellbeing Strategy, a key statutory responsibility of the board</i></li> </ul>	
<b>FINANCIAL IMPACT:</b>	
<i>This paper itself does not have direct financial implications however it is a strategic framework for the development of health and wellbeing focused services</i>	

## 1. RECOMMENDATIONS

- 1.1 The Board is asked to sign off the Health and Wellbeing Strategy (Appendix 1)
- 1.2 This paper proposes that the board agrees to the development of a forward plan for the Health and Wellbeing Board aligned to the actions and commitments within the Health and Wellbeing Strategy.

## 2. EXECUTIVE SUMMARY

- 2.1 The report provides context for the attached draft Health and Wellbeing Strategy which is a document being developed by the board outlining the borough's strategy for health and wellbeing of those living and working in Croydon.

## 3. Background and Context

- 3.1 Health and Wellbeing Boards are a formal committee of the local authority, created by the Health and Social Care Act 2012, charged with promoting greater integration and partnership between bodies from the NHS and local government. They have a statutory duty, with clinical commissioning groups (CCGs), to produce a joint strategic needs assessment and a joint Health and Wellbeing Strategy for their local population.
- 3.2 The previous iteration of the Joint Health and Wellbeing Strategy had outcomes leading to 2018.
- 3.3 Developing the Joint Health and Wellbeing Strategy is a statutory requirement of the Board but also presents an opportunity to pull together the considerable work that is being undertaken across the borough into a cohesive strategy.

- 3.4 The health and care system needs to be designed for more effective communications between partners and the public to be able to see, and take part in, the changes as they are developed. The Health and Wellbeing Strategy is a tool to assist in the necessary shift towards prevention, both within the health and social care system but also within the wider community.
- 3.5 A Draft version of the Health and Wellbeing Strategy was signed off in principle at the Health and Wellbeing Board on the 24<sup>th</sup> October 2018.

#### **4. The Strategy**

- 4.1 The Health and Wellbeing Strategy has been developed with partners and stakeholders from across the borough.
- 4.2 Outcomes have been included which have been developed with the One Croydon Strategic Development Board alongside the development of the Health and Wellbeing Strategy as part of the Health and Care plan, giving a shared set of outcomes for both the Health and Wellbeing Strategy and the Health and Care plan.

#### **5. Delivering the strategy**

- 5.1 Delivery of the strategy will be undertaken by a host of partnerships, groups and organisations and is reflected in a broad range of plans. These have been mapped by the Board.
- 5.2 The delivery of the commitments within the strategy will be overseen by the Health and Wellbeing Board. Board meetings will provide an opportunity to systematically review progress against the commitments and to provide additional multi-agency input into delivery. The Health and Wellbeing Board will work closely with the Local Strategic Partnership Boards and other relevant partnerships to support delivery of the actions within the Strategy.
- 5.3 It is proposed that the forward plan for the Health and Wellbeing Board aligns with the strategy priorities as a means of driving the delivery of the strategy.
- 5.4 It is also proposed that an annual review of the progress of this strategy be reported to the Board.

#### **6. Conclusion and Recommendations**

- 6.1 This paper proposes that the Board signs off the draft Health and Wellbeing Strategy.
- 6.2 This paper proposes that the board agrees to the development of a forward plan for the Health and Wellbeing Board aligned to the actions and commitments within the Health and Wellbeing Strategy.

## **7. CONSULTATION**

- 7.1 As outlined above the priorities have been developed with the Health and Wellbeing Board and have been informed by the consultation processes supporting the development of the Croydon Health and Care Plan including the Health and Care Plan Engagement event 20<sup>th</sup> November 2018.

## **8. SERVICE INTEGRATION**

- 8.1 Service integration is the one of the principles for the development of a Joint Health and Wellbeing Strategy and the attached document refers to integration throughout.

## **9. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS**

- 9.1 There are no direct financial implications arising from this report.
- 9.2 The strategy outlines the strategic direction that will inform future commissioning decisions. As these decisions are developed and implemented the financial implications will be fully explored and reported

Approved by: Lisa Taylor, Director of Finance, Investment and Risk and Section 151 Officer, Croydon Council

## **10. LEGAL CONSIDERATIONS**

- 10.1 The Director of Law and Governance comments that there are no legal considerations arising out of the recommendation in this report.

Approved by: Sean Murphy, Director of Law and Governance and Deputy Monitoring Officer

## **11. EQUALITIES IMPACT**

- 11.1 A full equality analysis is not be required. Health inequalities disproportionately affect vulnerable groups as well as groups that share protected characteristics. As such we will need to ensure the high level priority areas of work will help the Borough address wider determinants to prevent and reduce health inequalities and increase life expectancy for all communities. We will also need to ensure work with partners and key stakeholders is inclusive. As such further analysis/equality analysis may need to be undertaken as part of any decision-making processes and action plans developed to achieve each of the eight priority areas listed in the strategy.

- 11.2 Approved by Yvonne Okiyo, Equalities Manager

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**CONTACT OFFICER:** [Rachel Flowers, Director of Public Health, Croydon Council]  
[Rachel.Flowers@Croydon.gov.uk](mailto:Rachel.Flowers@Croydon.gov.uk) 020 8726 5596

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# CROYDON HEALTH AND WELLBEING STRATEGY





# FOREWORD

BY COUNCILLOR LOUISA WOODLEY, CHAIR OF THE CROYDON HEALTH AND WELLBEING BOARD

## **Croydon is an exciting and diverse borough that is growing rapidly – both physically and through culture, employment, and its rapidly transforming health sector.**

We are in the midst of a revolution in health and wellbeing, with multiple partners within the Health and Wellbeing Board significantly shifting their focus towards preventing ill health. This means moving beyond health and care services to those wider things that create and protect health, (the wider determinants of health) rather than focusing solely on managing the damage that poor mental, emotional or physical health causes to individuals, their families and communities.

Our Health and Wellbeing strategy is about how we work together to create the best conditions for people to live fulfilling lives. Everyone in Croydon deserves the best start in life and to grow up to work and live in an environment that enhances their wellbeing and creates the right conditions for them to fulfil their potential. This means living in a place that feeds your sense of worth, has community and feels safe. It is about having clean air to breathe and environments that encourage healthy choices.

Our Health and Wellbeing strategy captures the considerable work already going on across the borough and bring it together into a coherent strategic whole. The system needs to be designed for more effective communication between partners and the public to be able to see and take part in the changes as they are developed. This strategy is a tool to assist in the necessary shift towards prevention, both within the health and social care system but also within the wider community.

Across society, there is an increasing understanding that it is not good enough to merely focus on dealing with problems when they arise, there is a need to understand and tackle the root cause and stop issues from arising in the first place. Achieving this requires a shift in attitudes and cultures within our health and care services and beyond. The role of the Health and Wellbeing Board and this strategy is to provide the strategic oversight for those delivering this work and facilitate working together as a system to reach this goal.

I am very proud of the work being undertaken within Croydon, underpinned by the ambitious development of the One Croydon Alliance and the Council's recent Corporate Plan focusing on prevention and localities based working. The One Croydon Alliance brings together key partners in the borough on a scale never

seen before. Following demonstration of positive impact on outcomes and the achievement of success indicators, the One Croydon partners agreed to extend the commitment to March 2027 and work towards extending the scope. The Alliance has been integral in the development of One Croydon Health & Care Transformation plan to be published in July 2019 which will support the delivery of this strategy by focusing on joint actions agreed by leaders from the Council, NHS and the voluntary sector within the Croydon Transformation Board.

This is an exciting time for health and wellbeing in Croydon. This strategy represents a step change in providing transparency through the prevention agenda and welcomes the opportunity of locality approaches across the borough.



**Councillor Louisa Woodley  
Chair of the Croydon  
Health and Wellbeing Board**



# THE CHALLENGES

## IMPROVING HEALTH AND WELLBEING

Becoming a healthier, happier borough requires improvements in the circumstances in which people live. All of us have a role to play in improving the conditions that shape health and wellbeing.

Over 10,000 people in Croydon live in areas ranked amongst the most deprived ten per cent nationally. 1100 children are born into poverty every year in Croydon. People living in deprived neighbourhoods are more likely to: experience multiple disadvantage; die earlier and spend more years in long-term ill health. This is wrong and it needs to change.

Improving health requires having better social and economic conditions. For example, living in good quality affordable houses, achieving in education and working in good jobs.

The majority of early deaths in Croydon, as in the rest of the country, are the result of the impact of interactions between a number of complex circumstances, such as poverty, poor housing, having a learning or physical disability, isolation, and lack of opportunity. Unhealthy behaviours, for example smoking, low levels of physical activity and poor diet are driven by these circumstances.

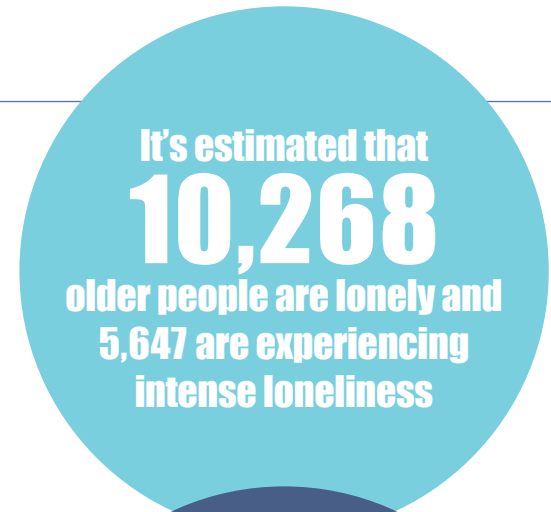
It is these social, environmental and lifestyle factors that contribute to the differences in health experienced by the people of Croydon.

## IMPROVING HEALTH AND CARE SERVICES

As more people develop multiple long term conditions the focus shifts from curing illnesses to managing health conditions. Health and care services need to adapt to these changes. Too often care is organised around single illnesses rather than all of an individual's needs. Many people are treated in hospitals when care in their own homes and communities would be better for them. Services can sometimes be hard to access and difficult to navigate.

Croydon will continue to develop the leading-edge work of the One Croydon Alliance to make care services more person-centred, integrated and preventative. All organisations need to work together to achieve this.

Improving health services needs to happen alongside achieving financial sustainability. This is a major challenge. Making the best use of the collective resources across organisations will help us sustain and develop Croydon's health and care system.



# CROYDON HEALTH AND WELLBEING STRATEGY

## WE HAVE A BOLD AMBITION

*'Working together to make Croydon a great place to live, work and play for all its residents through creating rapid improvements in the health and wellbeing of our communities'*

## AND A CLEAR VISION

*'Croydon will be a healthy and caring borough where good health is the default not the exception and those that experience the worst health improve their health the fastest'*

## How we are going to achieve this:

### Reducing Inequalities

People experiencing the worst health will improve their health the fastest giving everyone the best opportunity to live long, happy and healthy lives.

### Focusing on prevention

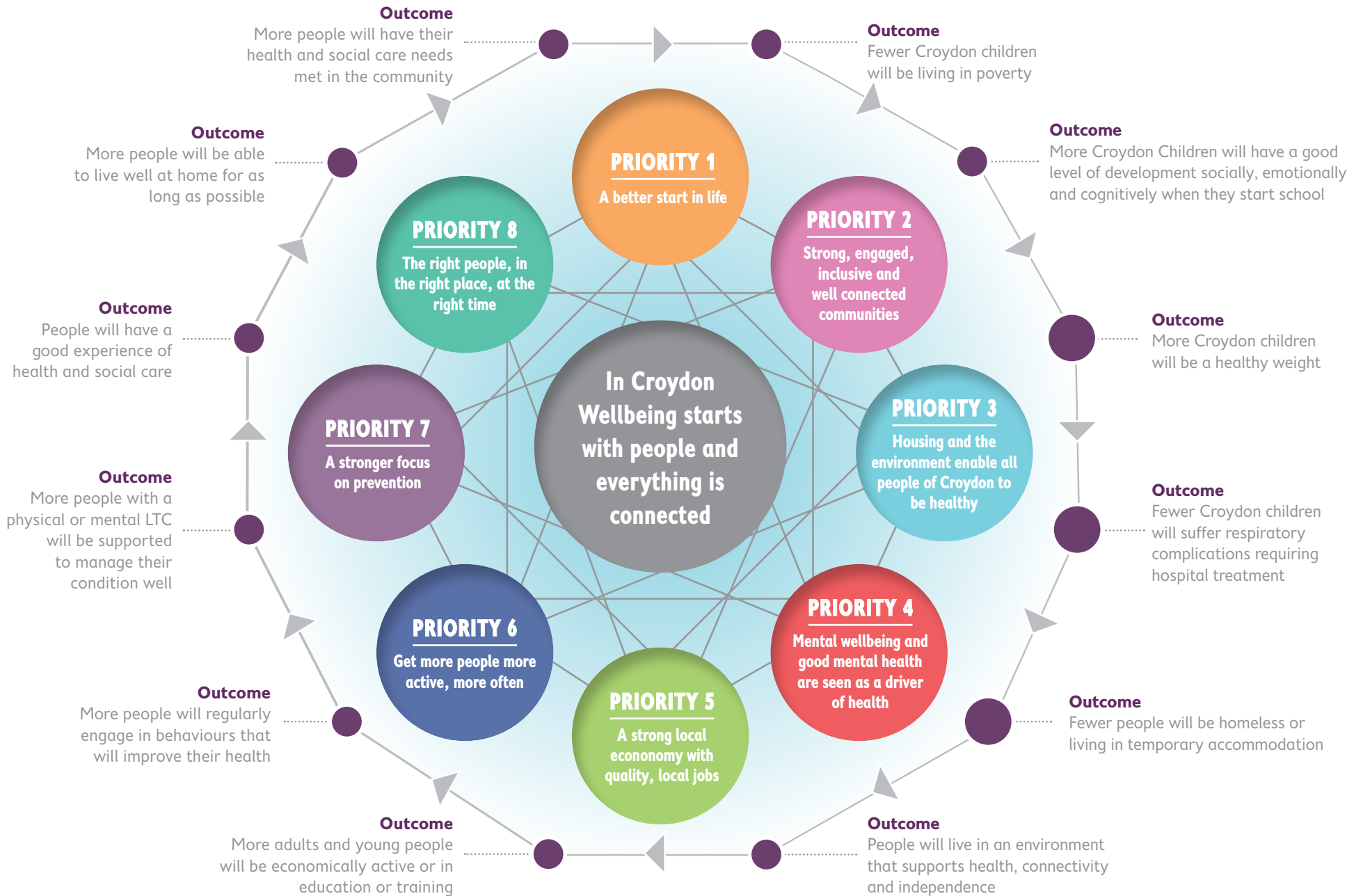
Focusing on prevention – We all have a role to play in preventing avoidable physical and mental harm caused by inequality, individual characteristics, health behaviours and environmental factors. Together we can create a better Croydon where opportunities are maximised, all can contribute and all can fulfil their potential, living longer, healthier lives.

### Increased Integration

With health and care services that place people, their families, neighbours and communities at the heart of decision making we will provide joined up care in the best place and in the best way for them to achieve positive outcomes. This will ensure a sustainable health and care system for people in Croydon today and for our future generations.



# PRIORITIES AND OUTCOMES





# PRIORITY 1: A BETTER START IN LIFE

**A better start in life** ensuring that children and young people are provided with the best physical and emotional environment for growing up in.

The first 1000 days of a child's life from conception to the age of 2 are fundamentally important because they lay the foundations of lifelong health and wellbeing. A child's experiences are shaped by the world in which their parents and carers live which is in turn shaped by a wide range of environmental, social and economic factors such as housing, a strong community, employment and education.

This means there is a huge opportunity to improve health and wellbeing outcomes and reduce inequalities by focusing on children and young people, their families and the circumstances in which they live from before conception through the early years of life. A better start in life for every Croydon baby from planning a pregnancy to age two means a focus both on the environmental, social and economic factors that affect the child's life and by providing high quality and joined up services from before pregnancy, through the antenatal period and up to the early years. Parents and care givers should be supported within their communities in accordance with their health

and social needs, including addressing issues from before pregnancy. We will therefore focus on implementing the recommendations from the Director of Public Health's 2018 Annual report which is about the first 1,000 days. Ensuring the best start will make a significant impact on the emotional resilience and mental health of children as they mature. However, many of our older children may not have received all the support they needed during these crucial early years or they may have experienced one or more adverse childhood events which negatively impact on their mental health. We must work to promote mental health and emotional wellbeing for all children and young people of Croydon. **Supporting the development and delivery of the Children and Young Person's Mental Health Transformation plan.**

All Croydon children should enter school in **reception** ready for school and equipped to have the best chance at life.

Croydon must continue its work to address healthy weight in children. There should be a focus on reducing the differences which exist across the borough. Prevalence among children in the most deprived areas of Croydon

is double that of children in the least deprived areas. The **Child Healthy Weight action plan** (2017-2020) takes a partnership approach across Croydon to addressing both healthy eating and physical activity levels.

There is an opportunity with the new London Healthy Years programme to focus efforts on younger children; this should be a priority to reduce the number of children who are overweight and obese in reception.

**In 2016 445 babies were born weighing less than 2.5kg (5.5lb)**





# PRIORITY 3: HOUSING AND THE ENVIRONMENT ENABLE ALL PEOPLE OF CROYDON TO BE HEALTHY

To be a healthy borough, our environment must promote positive wellbeing. This means Croydon's homes are affordable, warm, secure, and support independent living. This includes new developments such as the commitment to build more than 10,000 new residences in Croydon.

Green space, leisure provision and walking and cycling opportunities promote health and happiness. Considerations about future growth must ensure **adequate development of healthy high streets and enhanced open spaces.**

As Croydon grows and care settings change, facilities must enable the best care to be provided in the right place for the most efficient use of resources. Health and social care organisations need to ensure **there are enough facilities and they are fit for purpose** for those who use and work in them.

The average age of death for someone sleeping rough is 47 years old, and even lower for homeless women at 43. The reasons that people find themselves homeless are multiple and there is a clear, but complex relationship between housing, homelessness and health. Croydon is developing a **Homelessness Prevention Strategy** to develop a borough wide approach to preventing homelessness and addressing the needs of this vulnerable population. This includes adequate provision for temporary housing and long term housing solutions as well as outreach support and to increase access to care for people sleeping rough.

**2,449**  
households  
in temporary  
accommodation





# PRIORITY 4: MENTAL WELLBEING AND GOOD MENTAL HEALTH ARE SEEN AS A DRIVER OF HEALTH

Our ambitions for mental health are crucial for reducing health inequalities. Good employment, opportunities to learn, decent housing, financial inclusion and debt are all key determinants of emotional wellbeing and good mental health. **Improving mental health is everyone's business.** We want to see this led by employers, service providers and communities.

Three quarters of lifetime mental illness (except dementia) begins by the age of 25, so mental health and wellbeing support for children and families is a priority. This includes early support for women during pregnancy and the first few months post-birth, improved links with schools and better experiences for service users as they move between children and adult services.

Developed in the wake of the 2017 Woodley review, the **Mental Health Transformation** plan builds on the recommendations made. The plan commits to a redesign of community mental health services including improved information and advice, enhanced primary care support and more joined up working to improve access and

reduce repeat assessments. Care for people experiencing mental health crisis will be improved, with crisis resolution available in the community and more provision within health and social care.


**The Croydon Mental Health Strategy will be refreshed in 2019** providing an opportunity to develop a preventative approach focusing not just on the provision of services but also the development of resilience in individuals and communities and supporting general mental wellbeing across the life-course.

We need improved **integration of mental and physical health services** around all the needs of individuals. This means addressing the physical health needs of those living with mental illness, and always considering the mental and emotional wellbeing of those with physical illness.

There is a high prevalence of co-occurring mental health with alcohol/drug misuse, with evidence suggesting that people are frequently unable to access the care they need from services. There are many vulnerable people

within this group who easily fall through the gaps and end up in crisis. **Croydon will develop a whole person approach** to care for people with co-occurring mental health and substance misuse, so that they are able to access substance misuse and mental health services when they need to.

Suicide is the leading cause of death in men under 40, and self-harm is on the rise particularly in younger populations. Croydon's self-harm and suicide prevention strategy will support a collaborative approach to making **prevention of suicide and self-harm business as usual** across the whole of health and care in the borough.



**47,978**  
adults in Croydon  
have a common  
mental health  
problem at any  
one time.



# PRIORITY 5: A STRONG LOCAL ECONOMY WITH QUALITY, LOCAL JOBS

A good job is really important for good health and wellbeing of working age people. To reduce social inequalities, Croydon needs a **strong local economy driving sustainable economic growth for all people** across the borough. This includes creating more jobs and better jobs, ensuring our residents have the skills and can access the right pathways to secure these jobs, tackling debt and addressing health.

One of our biggest economic strengths as a borough is our health and medical sector, with a wealth of talent and a huge concentration of innovative organisations. With collaboration across private, public and community organisations, including our blossoming digital sector, **Croydon is perfectly placed to be a great location for health innovation.**

We must also recognise that health and care organisations employ a huge number of people in the borough. We must do all we can to **promote the health and wellbeing of the workforce** and reduce social inequalities through how people are employed.

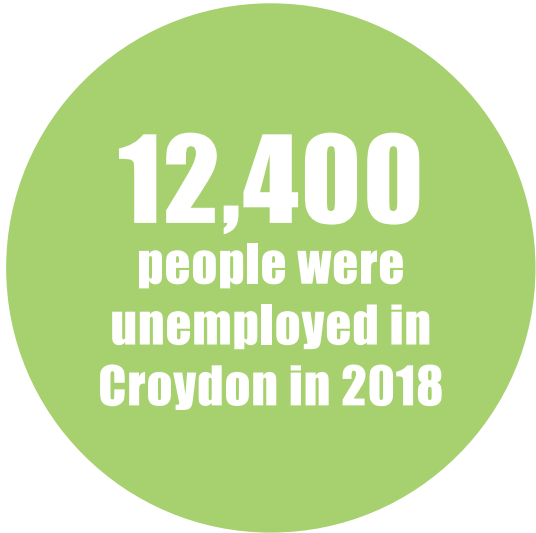
The NHS as the largest employer in the borough has a particular responsibility. It is not just what we commission and provide, but how we commission and provide services. Our procurement and employment practices need to ensure that we are developing a well-paid and skilled workforce that builds the capacity of local people to find and maintain and secure well paid jobs. This is equally applicable to all employers large and small who can take steps to improve the health of our workforces, as modelled through healthy workplace charters and the Council's commitment to the London Living Wage.

The health and care workforce within Croydon are highly trained, motivated, creative and caring, working hard to deliver high quality care for people in Croydon. This workforce, many of whom live within the borough, are an instrumental part of making change happen.

We should **work as one workforce for Croydon.** Developing shared values and collaborative working will support the joining up of services and make integration a natural progression. New population-based models of

care will require the development of increased working across organisational boundaries. We will build on the fantastic work of One Croydon to take this further across all aspects of the health and care sector within Croydon.

**Working fully in partnership with the third sector** and those in caring and volunteer roles in the community will be crucial to make the most of our borough wide assets



**12,400**  
people were  
unemployed in  
Croydon in 2018







# PRIORITY 7: A STRONGER FOCUS ON PREVENTION

We want Croydon to be a great place where everyone can live healthy and fulfilling lives. A radical upgrade in prevention requires **a whole family, whole-borough approach**.

Obesity is a huge local and national challenge. It is preventable, but is currently rising due to poor diet, low levels of physical activity and environments which encourage unhealthy weight.

Violence blights lives and fractures communities. In many cases it is a cause of preventable harm and as such requires a public health response to minimise future risk. **Croydon will pioneer work in this area, initially in relation to knife and gang related crime and extending this approach to domestic violence and sexual violence over time.**

About half of people born after 1960 will develop some form of cancer during their lifetime. Many of these can be linked to lifestyle. Cancer prevention, early diagnosis

and successful therapy will reduce inequalities and save money. Croydon must pursue a sustained programme to remove barriers to healthy lifestyles and support the behaviours needed to reduce the risk of preventable cancers. **We will redesign the lifestyle services in Croydon to provide a co-ordinated and wide ranging offer.** This will be tailored around the needs of the individual and will maximise our collective assets as a borough to support healthy behaviours.

Our services need to be more proactive and preventative in their approach. This will involve making more use of evidence-based interventions at the early stages of disease. Local, timely and easy access to tests and treatment will be important to prevent conditions getting worse, together with a focus on earlier identification of those at higher risk of developing conditions. These approaches should help people remain healthy and independent for longer and will be driven by the One Croydon **Together for Health Board**.

To protect the health of Croydon's communities, infection prevention and control, and environmental hazards such as air quality and excess seasonal deaths will be improved by a coordinated local and regional partnership approach. **The Croydon Health Protection Forum** will lead on this key agenda.

**4 in 11**  
reception age  
children in Croydon  
are obese



# PRIORITY 8: THE RIGHT PEOPLE, IN THE RIGHT PLACE, AT THE RIGHT TIME

For too long, health and social care has ended up creating pathways and services that suit the process better than the people that use them. This has meant that it is all too common that people find that they have ‘come to the wrong place’ and bounce around services before they are able to find the support or care that they need.

Through mechanisms such as the One Croydon Alliance, integration and collaboration between organisations will allow us to remove these barriers, and in developing services with the people of Croydon we will be able to make sure that wherever someone enters the system it is the system that takes ownership of the next steps not giving the responsibility straight back to the individual

We will develop the Croydon system to deliver **community led** support working to start with what is possible, not what is not.

For more effective, efficient health and care we need to **move more services to community settings**. This requires population-based, integrated models of care that are sensitive to the needs of local communities. This must be supported by better **integration between physical and mental health care** with care provided in and out of hospital.

Providing care in the most appropriate setting will ensure our health and social care system can cope with surges in demand, and provide effective urgent and emergency care.

How services are configured and where they are placed will change over the coming years, so **engagement with local populations** is really important to ensure services meet local needs.

**94,434**  
Croydon has the largest population of younger people aged 0-17 in London



# WHO WILL ACHIEVE THIS?

## THE HEALTH AND WELLBEING BOARD

Provide leadership and direction to help and influence everyone to address the 8 priority areas. The Health and Wellbeing Board will have a program of review to engage relevant partners to ensure the delivery of the commitments within the strategy. The Board will continually ask what we are doing to reduce inequalities; create a sustainable system and to improve wellbeing through shifting to a preventive approach.

## OTHER GROUPS AND BOARDS

The delivery of the Health and Wellbeing Strategy will be through the Health and Wellbeing Board, the Local Strategic Partnership Board and their affiliated groups and boards, as well as wider boards from areas not traditionally seen as being key to health yet equally important. The structures of the Health and Wellbeing Board and any sub-groups needs to align with the principles of this strategy to ensure its delivery. Alongside the development of action plans to deliver the strategy, there will be an extensive review of the governance structures in place to support this vision.

The Health and Wellbeing Board will additionally work with its wider partners and local communities to assist the development of plans and strategies to achieve specific priorities and outcomes of the Croydon Health and Wellbeing Strategy.

## PEOPLE AND COMMUNITIES

Take ownership and responsibility for promoting community health and wellbeing. Support vulnerable members of the community to be healthy and have strong social connections.

## HEALTH AND CARE ORGANISATIONS IN CROYDON

Our health and social care commissioner and provider organisations will lead the coordination of these changes over the coming years, starting with the **Croydon Health and Care Plan** as the key mechanism for delivering this strategy.

We will continue to develop the One Croydon Alliance as a key vessel to implement the Health and Wellbeing Strategy through integration and system development.

**One health and care system working to make sure that every individual is able to say:**

*'I am in control of my own health and wellbeing'*

*'I am able to stay healthy, active and independent as long as possible'*

*'I live in an active and supportive community'*

*'I can access the support my family and I need'*

*'I can access quality services that are created with me and my family in mind'*



*The Health and Wellbeing Board is a statutory board of the council  
made up of the following partners:*



*Representing the community and voluntary sector on the board:*



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<b>REPORT TO:</b>	<b>HEALTH AND WELLBEING BOARD (CROYDON)</b> <b>27 February 2019</b>
<b>SUBJECT:</b>	<b>Croydon's Health and Care Transformation Plan</b>
<b>BOARD SPONSOR:</b>	<i>Agnelo Fernandes, Chair Croydon CCG</i> <i>Guy Van Dichele, Executive Director Health, Wellbeing and Adults</i>
<b>BOARD PRIORITY/POLICY CONTEXT:</b>	
<p>Croydon's health and care transformation plan will be a key delivery plan of the Health and Well Being Board's Strategy, which in turn provides the health and care and in parts the wider determinants response to the Croydon Local Strategic Partnership vision.</p> <p>The plan will also inform the South West London Health and Care Partnership Plan which is being refreshed.</p>	
<b>FINANCIAL IMPACT:</b>	
<p>Partner Directors of Finance are refreshing the Croydon wide financial position. The position is expected to be similar to that modelled in 2017 with approximately £160m cumulative challenge over 5 years if the system 'does nothing'.</p> <p>Our plans are required to improve health and well-being as well as ensure a sustainable health and care system.</p>	

## **1. RECOMMENDATIONS**

- 1.1 To comment on and note the emerging health and care transformation plan
- 1.2 To note the health and care transformation plan will be signed off during March by partners and agree the Health and Well Being Board Executive Group sign off the health and care transformation plan discussion document for circulation in April. Publication will be in July 2019.

## **2. EXECUTIVE SUMMARY**

- 2.1 The One Croydon Transformation Board is developing Croydon's health and care transformation plan.
- 2.2 It will be a key delivery plan of the Health and Well Being Board's Strategy, which in turn provides the health and care and in parts the wider determinants response to the Croydon Local Strategic Partnership vision. The plan will also inform the South West London Health and Care Partnership Plan which is being refreshed.

- 2.3 The plan will not start from scratch or replace individual partner plans, but will build upon them and on specific service strategies, by taking a common lens and identifying key areas of collaboration.
- 2.4 This report provides the draft plan on page, draft outcomes framework and draft implementation plans. The full plan will be available in March as a discussion document, with the final plan being published in the summer.

### **3. DETAIL**

#### **Introduction**

- 3.1 One Croydon partners are on a journey to sustainably transform health and care services, working with wider South West London partners where appropriate.
- 3.2 A number of milestones have provided an opportunity to take stock of the significant progress made over the past years to transform services, to reset the momentum and the scale of transformational change and improvement and to set out Croydon's health and care transformation plan. These milestones include:
- The One Croydon Alliance Agreement, which sets out how partners will work together, extended its agreement to 2027 in March 2018 It also agreed to extend its term expand the remit of the Alliance Agreement to ensure system transformation for the whole population
  - The development of the Health and Well Being Strategy
  - The expected publication of the NHS Long Term Plan which in turn will need a local response. The South West London Sustainability and Transformation Partnerships is refreshing the South West London strategy and a local health and care plan will inform the South West London Plan.
- 3.3 A series of sessions have been held over the past months with partners to refresh our outcomes (health and care, system and financial) and to refresh our plans for delivering system transformation for the whole population.
- 3.4 In addition, there has been ongoing engagement to inform our plans. The latest held on 20 November 2019 involved over 160 members of the public, front line staff and stakeholder leaders (See Appendix 1 for a summary of the event).
- 3.5 Appendix 2 sets out a draft plan on a page, draft outcomes framework and draft implementation plans. System wide programme boards continue to work to refine our plans especially to ensure the engagement event feedback is reviewed and reflected appropriately in the final discussion document.

#### **The draft plan on a page (Appendix 2)**

##### ***Working together to help you lead your life***

- 3.6 The plan on a page sets out a golden thread from our long term goals, through to our priorities, the approach we will take to all that we do, and finally the initiatives we will focus on. It shows how our plans align with the Health and Well

Being Board Strategy.

- 3.7 In essence our strategic approach is to keep people well. We want people to **stay well** and we want to prevent things becoming a problem, if people do have a problem we want them to be able to **manage well**, and have access to the things that will help themselves, and for those that have the **greatest need**, we want them to have access to services in the right place, at the right time, first time.
- 3.8 Factors such as the environment we live in, the education we receive and the relationships around us are major contributors to health, accounting for 80% of an individuals' health and wellbeing. We will work with the wider determinant factors that contribute to the health of residents the most. They each have a role to play in helping people stay well, manage well and supporting people with the greatest need.
- 3.9 Our strategic initiatives will ensure a whole system shift towards this preventative model of care, including self-care, self-management and personal resilience, with an asset based approach. We know in Croydon there are certain long term conditions that are more prevalent than others and we want to focus on trying to prevent further development of these conditions. Supporting the development of resilient communities will play an important role in individuals become more resilient. Ensuring support and services are tailored to local needs, will add to this resilience.

#### **The draft outcomes framework**

- 3.10 We have developed an outcomes framework that has a balanced set of measures in order to monitor the changes we are making as well as whether they are actually leading to improvement where we need them.
- 3.11 Our challenges have driven our long term (10 year) goals that will demonstrate the health and wellbeing improvements and the infrastructure changes that we need to see.
- 3.12 We have considered the key factors that will have the greatest impact for the residents of Croydon on these goals and set (5 year) outcomes accordingly.
- 3.13 To ensure we are heading in the right direction we must keep track of the changes we expect to see annually. Appendix 1 sets out the annual health and wellbeing indicators and the system indicators.
- 3.14 However we cannot be driven solely by delivering these health and wellbeing indicators as this will not lead to transforming the way we work together and deliver support and services across the health and care system. We have therefore also set transformation indicators that will show we are delivering the health and care system change we need to see.

#### **The draft implementation plans**

- 3.15 Programme Boards have been working to develop transformation plans over the next 5 years. They reflect feedback from continued engagement.

- 3.16 The plans primarily focus on rolling out and embedding current plans such as social prescribing, Local Voluntary Partnerships and group consultations, as well as new plans such as the Community Led Support being led in Social Care for our multi-agency staff.

### **The NHS Long Term Plan (Appendix 3 – NHS Long Term Plan Summary)**

- 3.17 The NHS Long Term Plan was published on 7<sup>th</sup> January. A review is currently underway to fully understand the implications and the potential impact for the wider system and the health and care transformation plan.
- 3.18 An initial review reflects there is significant alignment of the with our local health and care transformation plan.

### **Sign off of the plan**

- 3.19 With the publication of the NHS Long Term Plan there is an expectation that areas produce a local 5 year plan by the summer. Croydon's health and care transformation plan discussion document will therefore be produced by the end of March for publication in the summer.
- 3.20 The plan will require partner sign off during March and it would be helpful to have the Health and Well Being Board approval as the plan is a key document to delivery of the HWBB Strategy.
- 3.21 As the Health and Well Being Board will not meet until April, it is proposed that the Health and Well Being Board Executive Group sign of the discussion document.

## **4. CONSULTATION**

- 4.1 To provide the best possible services for the people of Croydon we need to keep having open and honest conversations with Croydon residents. There is continued engagement with the public that have informed our plans to date. Most recently, the Health and Well Being Board Chair, hosted an event in 20<sup>th</sup> November 2018 which engaged with over 160 members of the public, front line staff and stakeholder leaders. (See Appendix 1 for a summary of the event).
- 4.2 A film has been made to give a flavor of the day <https://youtu.be/Crg5k-rMges>
- 4.3 Programme Boards are reviewing the outcome of the event. An initial review indicates confirmation that many plans being implemented or planned for are the right thing.

## **5. SERVICE INTEGRATION**

- 5.1 Our challenges show that we are not delivering all the **health and care outcomes** that our population deserves. We also see that some of our current models of care are not **affordable** or **sustainable**. We need to work together to change the way we support local people to improve their health and care.

- 5.2 We need to change our **models of care**, interactions with our residents and be more proactive so that they better suit the health and care needs of local people. We must do this at a scale that will have the biggest impact and at a pace to keep up with the growing demand.
- 5.3 Some of our current services can be **fragmented and disjointed**. Teams do not work closely enough with other teams, there are disconnects between our organisations, this all makes the user experience longer and more difficult than it needs to be. Our local system is fragmented – we must continue to work to remove the unnecessary barriers between our services and the teams that are all working to support the same local people.
- 5.4 Too many of our services are focused on supporting those in crisis or those with the most acute health and social care needs. We need to reset our **operating model** so that we work to **support people to stay well for longer, and delay and avoid** more people from becoming acutely unwell in the first place and de-escalating need at the first point of contact. We must do this by working more closely together and planning a united and holistic model of support and care for local people that is seamless at the point of use.
- 5.5 If we do nothing the significant inequalities in health between communities will not improve and our system financial position will worsen. We must therefore fundamentally change our approach and our model of care. We must:
- Focus on prevention and proactive care and contact – we want to support local people before things become a problem
  - Unlock the power of communities - key to helping local people stay fit and healthy for longer is to connect them with their neighbours and communities.
  - Locality matters - making sure local people have access to integrated services that are tailored to the needs of local communities

## 6. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

- 6.1 Partner Directors of Finance are refreshing the Croydon wide financial position. The position is expected to be similar to that modelled in 2017 with approximately £160m cumulative challenge over 5 years if the system ‘does nothing’.
- 6.2 Our plans are required to improve health and well-being as well as ensure a sustainable health and care system.

## 7. LEGAL CONSIDERATIONS

- 7.1 None

## 8. EQUALITIES IMPACT

- 8.1 The plan focuses on how we can reduce inequalities across Croydon. Our goals aim to ensure:
- People to live longer healthier lives
  - People that live in the most deprived areas of Croydon to live as long as those in the most affluent areas

8.2 A full impact assessment will be completed as part of finalising the document.

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**CONTACT OFFICER:**

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**BACKGROUND DOCUMENTS:** None

## Appendix 1

### Croydon Health and Care Plan Feedback from the engagement event 20 November 2018



# Introduction



- Since publishing the South West London Health and Care Plan STP Refresh in November 2017, we have been working together to define a case for improvement for Croydon.
- We held a partnership health and care event on Tuesday 20 November 2018 to identify shared actions that will have the greatest impact on the issues identified.
- Over 160 people attended the event
  - Frontline staff – NHS, Local Authority, Voluntary Sector
  - Representative sample of local people of the borough
  - Community and stakeholder groups
- The feedback is being reviewed by our One Croydon programme boards to help inform the development of our Croydon Health and Care Plan. This will be published as a “discussion document” by March 2019. All of the boroughs in South West London will also be doing this in parallel.



# We designed an interactive day which focussed on action



**One Croydon**  
Your health and care partnership

## Croydon Health and Care Event

Tuesday 20 November 2018



**One Croydon**  
Your health and care partnership

Time	Agenda Item
10.00-10.05	<b>Welcome</b> Councillor Louisa Woodley, Chair of Croydon Health and Wellbeing Board
10.05-10.10	<b>We need your help today</b> Dr Agnelo Fernandes, Clinical Chair of NHS Croydon Clinical Commissioning Group
10.10-10.15	<b>Tudor Academy Choir</b> "We get by with a little help from our friends"
10.15-10.35	<b>How today will work and icebreaker</b>
10.35-10.50	<b>Understanding the borough</b> Rachel Flowers, Director of Public Health, Croydon Council
10.50-10.55	<b>Introducing Robert's Story</b> Kate Pierpoint, Chief Executive Officer, Age UK Croydon
10.55-11.05	<b>Engagement to date and wider context and challenges</b> Andrew Eyres, Accountable Officer, NHS Croydon Clinical Commissioning Group
11.05-11.25	<b>Our Focus Areas today and initial reflections</b> Guy Van Dichele, Executive Director – Health, Well-being and Adults, Croydon Council and Collaborate
11.25-11.40	<b>Refreshment break</b>
11.40-12.20	<b>Activity 1: Imaginarium</b>
12.20-13.00	<b>Activity 2: Exploring the focus areas</b>
13.00-13.15	<b>Dotmocracy</b>
13.15-14.00	<b>Lunch break</b>
14.00-14.15	<b>Success stories so far</b> Nnenna Osuji, Medical Director and Deputy Chief Executive, Croydon Health Services NHS Trust
14.15-15.30	<b>Activity 3: Ideas into Action</b>
15.30-15.45	<b>Gallery Walk – reviewing the work of our day</b>
15.45-15.55	<b>Reflections from the day</b>
15.55	<b>Next steps and closing remarks</b>
16.00	<b>Close</b>

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## Taking action on health and care



**One Croydon**  
Your health and care partnership

What can people do to help themselves manage their health better?	What could we all be doing earlier?	What can be done now to improve support?	What might take more planning?	What could we do to support families, parents and carers?

32

We believe in an inclusive and innovative approach to care.

[www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

**We made a film to give people a flavour of the day ...**



<https://youtu.be/Crg5k-rMges>

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# A visual summary of the event

## Croydon local Health & Care plan engagement event



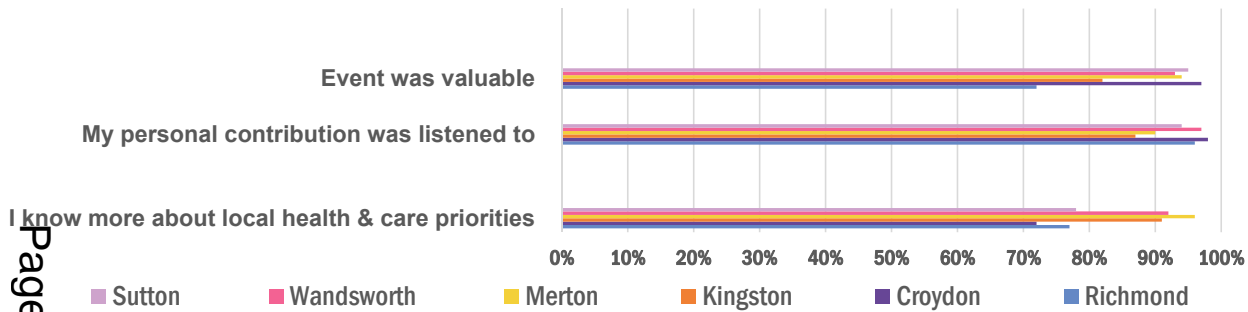
We believe in an inclusive and innovative approach to care.

www.swlondon.nhs.uk



# High level feedback from participants

% of people who felt the event was worthwhile

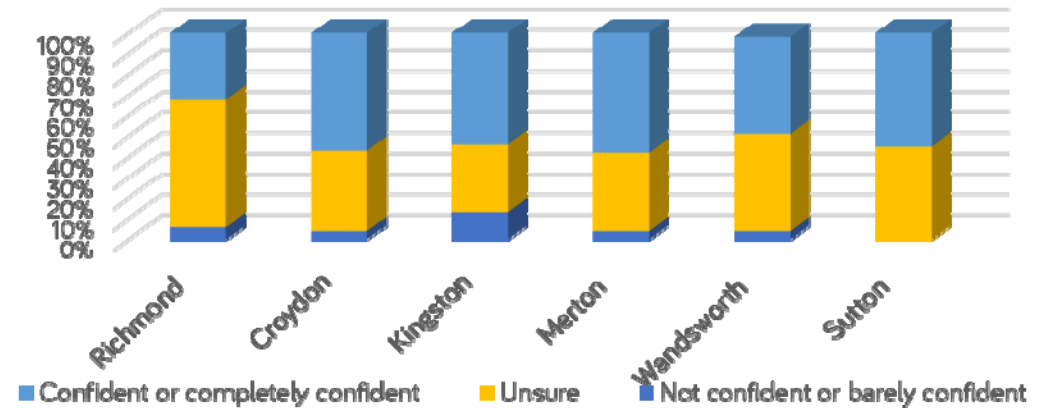


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166 attendees at the event. Of the 99 participants who completed the feedback form:

- 97% felt the event was valuable
- 98% felt their contribution was listened to
- 58% felt confident that the priorities will make a positive difference to health and care in Croydon
- 72% felt they know more about the health and care partnership than they did before the event

Priorities outlined will make a positive difference to health and care services in this borough





## Finalising Croydon's Health and Care Plan which will...



- Be a delivery plan for the Health and Well Being Strategy
- Be co-designed and owned by both health and local authority partners
- Address the developing health and care needs of the local population
- Outline the vision for health and care locally and the health and care model that are being developed
- Identify and address financial issues in the borough so that we can take a system-wide approach to our collective financial challenges
- Identify and address workforce, clinical and other sustainability issues in the borough
- Outline what the local system will do to support the SWL health prevention/promotion priority (Children and Young People's Mental Health)
- Allow partners to shape the developing plans through the governance structures in their organisations

## Next steps...



- **December/Jan 2018/19:** The film, illustration and evaluation is sent to all those who attended event, together with a note from the HWBB Chair outlining next steps for moving forward together.
- **December 2018 onwards:** Programme Board chairs are to come together to evaluate the outcomes of the day and agree ideas that should be explored further. A proposed priorities will be reviewed by programme boards.
- Updates/discussion at the Health and Wellbeing Boards during **January and February.**
- **Dec – March 2019:** analysis health and care plan initiatives undertaken and priority actions identified.
- **March 2019:** Health and Wellbeing Board receive draft *Health and Care Plans Discussion Documents* for approval, and following this *Health and Care Plans Discussion Documents* circulated to partner organisations for consideration and comment, as well as wider engagement with communities.
- **May – June 2019:** Feedback considered by Partnership Groups and recommendations made for inclusion in the final health and care plan.
- **June 2019:** Final Health and Care Plan presented to the Health and Wellbeing Board for approval.
- **July 2019:** Publication of Health and Care plans.

***APPENDIX 2***

***DRAFT***

***Croydon's Health and Care Transformation Plan 2019/20 – 2024/25  
Summary***

***Plan on a Page  
Outcomes Framework  
Programme Plans***

# Our plan on a page

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## *Working together to help you lead your life*

The plan on a page sets out a clear path from our long term goals to our priorities and our plans for delivery.

Our strategic approach to all that we do is to:

- **focus on prevention and proactive care** – we want to support local people before things become a problem

Our overall aim is to keep people well. We want people to stay well and we want to prevent things becoming a problem. If people do have a problem we want them to be able to manage well, and have access to support that will help them help themselves. For those that have the greatest need, we want them to have access to services in the right place, at the right time, first time.

- **unlock the power of communities** – key to helping local people stay fit and healthy for longer is to connect them with their neighbours and communities.

The key to helping local people stay fit and healthy for longer is to connect them with their neighbours and communities. Social prescribing is a way of supporting people to use all of the resources within their community. Working with the strong voluntary sector in our borough to connect local people to be part of broader support networks so that local people can take back control of their own well-being.

- make sure local people have access to **integrated services that are tailored to the needs of local communities** – locality matters

We want to keep people well and out of hospital. Making sure local people have access to services, closer to home, wherever they live in the borough. Services must be accessible and responsive to their individual needs.

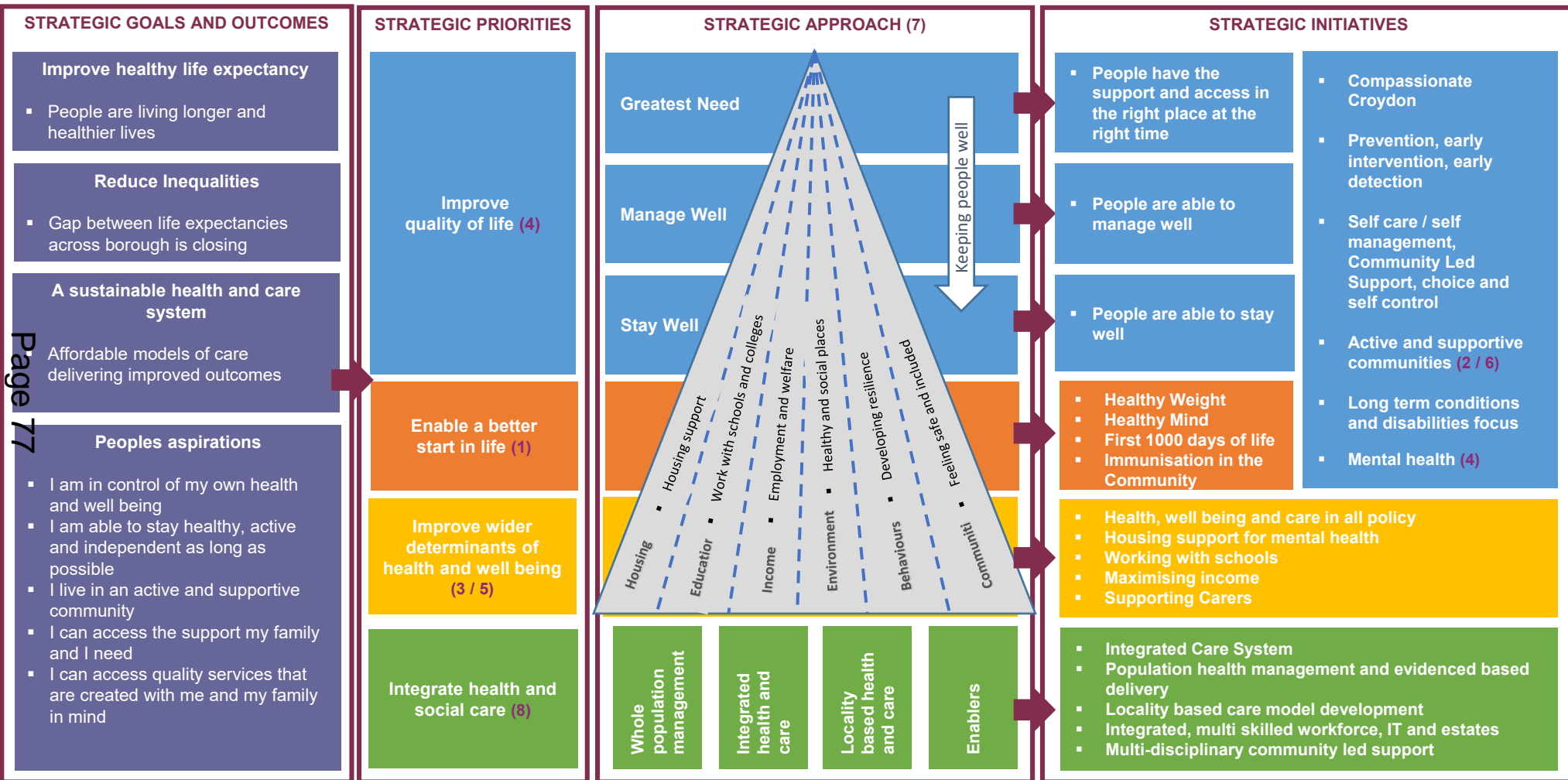
Factors such as the environment we live in, the education we receive and the relationships around us are major contributors to health, accounting for 80% of an individual's health and wellbeing; whether that is to keep peoples well, help them manage well, our support those with the greatest need. We will work to improve the wider factors that contribute to the health of residents the most. Our strategic initiatives will ensure a whole system shift towards this preventative model of care, including self-care and self-management. We know in Croydon there are certain long term conditions that are more prevalent than others, such diabetes, cardiovascular disease and respiratory disease and we want to focus on trying to prevent further development of these conditions.



# Croydon's health and care transformation plan on a page **DRAFT v20**



## OUR VISION Working together to help you lead your life



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(No.) = Supports delivery of Health and Wellbeing Strategy priority areas

(1) A better start in life, (2) Strong, engaged, inclusive and well connected communities, (3) Housing and the environment enable all people of Croydon to be healthy (4) Mental wellbeing and good mental health are seen as a driver of health, (5) A strong local economy with quality, local jobs, (6) Get more people more active, more often, (7) A stronger focus on prevention (8) The right people, in the right place, at the right time

# Our Outcomes

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Measurement is a critical part of testing and implementing changes. We have developed an outcomes framework that has a balanced set of measures in order to monitor the changes we are making as well as whether they are actually leading to improvement where we need them.

Our challenges have driven our long term (10 year) goals that will demonstrate the health and wellbeing improvements and the infrastructure changes that we need to see.

We have considered the key factors that will have the greatest impact for the residents of Croydon these goals and set (5 year) outcomes accordingly.

To ensure we are heading in the right direction we must keep track of the changes we expect to see annually. We have set out the annual health and well being indicators and the system indicators.

However we cannot be driven solely by delivering these health and well being indicators as this will not lead to transforming the way we work together and deliver support and services across the health and care system.

We have therefore also set transformation indicators that will show we are delivering the health and care system change we need to see.

**OUR GOALS (10 years)**

- Improve **healthy life expectancy** in Croydon from 62 years to 66 years for men and from 62.8 to 66.8 years for women over the next 10 years
- Reduce **premature mortality** from 317 (per 100,000) to 250 over the next 10 years

- Reduce the **gap in life expectancy** from one place to another in Croydon for men from 9.4 years to 7.4 years and for women from 7.6 years to 5.6 years over 10 years.

**Integrated health and care provision that meets people's aspirations**

- **Increase the proportion of activity in the community:** asset based individuals and communities, voluntary sector, social care, out of hospital setting (further work needed)
- Increase activity in out of hospital settings and reduce unnecessary **acute activity shifted to out of hospital** setting by 2024
- High level measure on the development of local **workforce** with health and social care skills to be developed
- Sustainable **recurrent health and care financial performance**

**OUR STRATEGIC OUTCOMES (5 Years)**

<b>Improve quality of life</b>	<p><b>Health and well being</b></p> <ol style="list-style-type: none"> <li>1. More people will regularly engage in <b>behaviours</b> that will improve their health</li> <li>2. More people with physical or mental long term conditions and their families and carers will be <b>supported to manage their condition well</b></li> <li>3. More people will be able to <b>live well at home</b> for as long as possible</li> </ol> <p><b>Quality and Appropriateness of Care</b></p> <ol style="list-style-type: none"> <li>4. People will have positive <b>experience and outcomes</b> of health and social care</li> <li>5. More people will have their health and social care needs met in the <b>community</b>.</li> </ol>
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<b>Enable a better start in life</b>	<p><b>Increase families confidence in resilience &amp; self care</b></p> <ol style="list-style-type: none"> <li>6. Fewer children will be living in <b>poverty</b></li> <li>7. More children will have a maximised their <b>level of development</b> socially, emotionally and cognitively when they start school</li> <li>8. More children will be a <b>healthy weight</b></li> <li>9. Fewer children will suffer <b>respiratory complications</b> requiring hospital treatment.</li> </ol>
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<b>Wider determinants</b>	<ol style="list-style-type: none"> <li>10. Fewer people will be <b>homeless or living in temporary accommodation</b></li> <li>11. People will live in an <b>environment that supports health</b>, connectivity and independence</li> <li>12. More adults and young people will be <b>economically active or in education or training</b>.</li> </ol>
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<b>Integrate health and social care</b>	<ol style="list-style-type: none"> <li>13. <b>Effective, multi disciplinary teams around the person providing seamless care</b></li> <li>14. Increased proportion spent on <b>prevention</b> and on <b>out of hospital</b></li> <li>13. <b>Sustainable health and care provision that meets people's aspirations</b></li> </ol>
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<p><b>Health and well being</b></p> <ol style="list-style-type: none"> <li>1a. Adults taking part in sports and physical activities</li> <li>1b. Smoking prevalence</li> <li>1c. Adult obesity</li> <li>1d. Proportion of people who report good life satisfaction and worth.</li> <li>2a Diabetes overall clinical care: people with T2DM that receive all 8 point process</li> <li>2b Diabetes: estimated diagnosis rate of the estimated prevalence of diabetes</li> <li>2c Dementia diagnosis rate</li> <li>2d Number of emergency admissions for back, neck and musculoskeletal pain</li> <li>2e Long term conditions prevalence gap by indices of multiple deprivation</li> <li>3a Excess winter deaths</li> <li>3b People who use social care who have control over their lives</li> <li>3d <b>ASCOF – social care measures. (tbc)</b></li> </ol> <p><b>Quality and Appropriateness of Care</b></p> <ol style="list-style-type: none"> <li>4a People with long term conditions feel able to manage their condition</li> <li>4b <b>Person experience and decision making (tbc)</b></li> <li>5a Rate of unplanned hospitalisations aged 65+ for chronic ambulatory care sensitive conditions</li> <li>5b Deaths which take place in hospital- all ages</li> <li>5c Delayed transfer of care from hospital that are attributed to adult social care</li> <li>5d Proportion of people aged 65 and over who were still at home 91 days after discharge from hospital into re-ablement/rehabilitation.</li> </ol> <p><b>Increased number of community hubs and co-located services in local communities</b></p>
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<ol style="list-style-type: none"> <li>6a. Children in poverty (under 16)</li> <li>6a. Low birth weight of term babies</li> <li>7a .School readiness: maximised level of development at the end of reception year</li> <li>7b. School pupils with social, emotional and mental health needs</li> <li>7c. Rate of exclusions in primary and secondary school</li> <li>8a. Excess weight among children in reception year</li> <li>9a. Admissions for respiratory tract infections in infants aged 2,3 and 4</li> <li>9b. Unplanned hospital admissions for asthma for under 19</li> <li>9c. MMR for 2 doses</li> <li>9d. Flu vaccinations uptake in at risk groups <b>(is this transformational?)</b></li> </ol>
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<ol style="list-style-type: none"> <li>10a. Households in temporary accommodation <b>or reduced homelessness?</b></li> <li>11a .Air_quality indicators</li> <li>11b. Access to healthy assets</li> <li>12a. Unemployment rate, maximisation of income and reduction in poverty</li> <li>12b. Employment of people with mental illness or learning disability</li> <li>12c. 16-17 year old not in education, employment or training.</li> <li>12d. <b>Increased social inclusion</b></li> </ol>
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<ol style="list-style-type: none"> <li>13a. Recurrent health and social care <b>financial balance</b></li> <li>13b 100% use of Croydon <b>integrated pathways</b></li> <li>13c Reduced spend on <b>private sector</b></li> <li>13d <b>Greater market share</b> of maternity and of planned care in Croydon</li> <li>14a Reducing <b>readmission rates</b></li> <li>14b Reducing <b>length of stay</b></li> <li>14c Lower waste on <b>drugs</b></li> <li>14d Lower <b>Do Not Attend rates</b></li> <li>15a Increased <b>multi disciplinary teams</b></li> <li>15b Higher <b>productivity</b> of staff, clinics, theatres, beds, premises.</li> <li>15c <b>Reduced social isolation</b></li> </ol>
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OUR TRANSFORMATIONAL CHANGE (Incremental increases annually)		OUR HEALTH AND CARE INDICATORS (Incremental increases annually)	
Page 80	<p><b>Improve quality of life</b></p> <p>Increased coverage of social prescribing</p> <p>Increased voluntary sector and communities in delivering preventative services</p> <p>Increased number of <b>community hubs and co-located services in local communities</b></p> <p>Increased identification of those at risk of and those with a <b>long term condition</b> in order to proactively manage their condition</p>	<p><b>Health and well being</b></p> <p>1a. Adults taking part in sports and physical activities</p> <p>1b. Smoking prevalence</p> <p>1c. Adult obesity</p> <p>1d. Proportion of people who report good life satisfaction and worth.</p> <p>2a Diabetes overall clinical care: people with T2DM that receive all 8 point process</p> <p>2b Diabetes: estimated diagnosis rate of the estimated prevalence of diabetes</p> <p>2c Dementia diagnosis rate</p> <p>2d Number of emergency admissions for back, neck and musculoskeletal pain</p> <p>2e Long term conditions prevalence gap by indices of multiple deprivation</p> <p>3a Excess winter deaths</p> <p>3b People who use social care who have control over their lives</p> <p><b>3d ASCOF – social care measures. (tbc)</b></p> <p><b>Quality and Appropriateness of Care</b></p> <p>4a People with long term conditions feel able to manage their condition</p> <p><b>4b Person experience and decision making (to be developed)</b></p> <p>5a Rate of unplanned hospitalisations aged 65+ for chronic ambulatory care sensitive conditions</p> <p>5b Deaths which take place in hospital- all ages</p> <p>5c Delayed transfer of care from hospital that are attributed to adult social care</p> <p>5d Proportion of people aged 65 and over who were still at home 91 days after discharge from hospital into re-ablement/rehabilitation.</p>	
	<p><b>Enable a better start in life</b></p>	<p>6a. Children in poverty (under 16)</p> <p>6a. Low birth weight of term babies</p> <p>7a .School readiness: maximised level of development at the end of reception year</p> <p>7b. School pupils with social, emotional and mental health needs</p> <p>7c. Rate of exclusions in primary and secondary school</p> <p>8a. Excess weight among children in reception year</p> <p>9a. Admissions for respiratory tract infections in infants aged 2,3 and 4</p> <p>9b. Unplanned hospital admissions for asthma for under 19</p> <p>9c. MMR for 2 doses</p> <p>9d. Flu vaccinations uptake in at risk groups</p>	
<p><b>Wider determinants</b></p>	<p><b>Greater engagement</b> with the wider determinants of health partners</p> <p>Wider determinant partners demonstrably consider the <b>impact of policy and plans</b> on health and care</p>	<p>10a. Households in temporary accommodation</p> <p>11a .Air_quality indicators</p> <p>11b. Access to healthy assets</p> <p>12a. Unemployment rate, maximisation of income and reduction in poverty</p> <p>12b. Employment of people with mental illness or learning disability</p> <p>12c. 16-17 year old not in education, employment or training.</p> <p><b>12d. Increased social inclusion</b></p>	
<p><b>Integrate health and social care</b></p>	<p><b>Increased the organisational alignment of back office resources</b></p> <p><b>Increased market share</b> of maternity and of planned care in Croydon</p> <p>Increased <b>multi disciplinary teams</b></p>	<p>13a. Recurrent health and social care <b>financial balance</b></p> <p>13b 100% use of Croydon <b>integrated pathways</b></p> <p>13c Reduced spend on <b>private sector</b></p> <p>14a Reducing <b>readmission rates</b></p> <p>14b Reducing <b>length of stay</b></p> <p>14c Lower waste on <b>drugs</b></p> <p>14d Lower <b>Do Not Attend rates</b></p> <p>15b Higher <b>productivity</b> of staff, clinics, theatres, beds, premises.</p>	

# Our programmes of delivery

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To deliver our ambitious goals we have developed a number of transformation programmes to lead the implementation of our plans . These do not describe all the work happening in Croydon. They set out our joined up approach to transforming services to achieve our vision. These programmes can be split into two themes:

- Models of care - the way health and care support and services are delivered. We will redesign preventative and proactive models of care that focus on the needs of local communities
- Infrastructure enablers – the way we work together to deliver our goals as well as the assets we have that will make it support delivery of our goals such as our workforce, IT and estates.



**PROGRAMMES TO DELIVER OUR INIAITIVES**

**Better Start in Life**

- | Stay Well   | Manage Well   | Greatest Need  |
|---|---|--|
| <ul style="list-style-type: none"> <li>Implement Children and young people's mental health transformation plan</li> <li>Implement Early Help Strategy focusing developing resilient families</li> <li>Deliver the All Age Healthy Weight Strategy and pathway</li> <li>A focus on pre-conception health via Sexual health transformation and facilitating healthy behaviour</li> <li>Implement the School Superzones Programme</li> <li>First 1000 days of life</li> <li>Healthy Weight - healthy weight prevention and early intervention services</li> <li>Healthy Mind – develop and implement a screening tool</li> <li>Bringing Immunisation into the community</li> </ul> | <ul style="list-style-type: none"> <li>Redesign paediatric pathway</li> <li>Expand pathway for A&amp;E Frequent attenders</li> <li>Promote GP telephone advice line and asthma nursing service</li> </ul> | <ul style="list-style-type: none"> <li>Develop community therapies strategy</li> <li>Redesign Children's community ASD diagnosis and care pathway</li> </ul> |

**Maternity**

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>Personalised care and choice of place of birth – personalised care plans, increasing midwifery led care</li> <li>Continuity of care – named lead midwife and buddy throughout a women's maternity journey</li> <li>Safe care – Multi disciplinary team training on Saving Babies Life's Care Bundle</li> <li>Multi disciplinary working and working across boundaries</li> <li>Healthy Pregnancy - Immunisations, Breast feeding strategy, parenting support, live well programme</li> <li>A fairer payment system</li> </ul> | <ul style="list-style-type: none"> <li>Postnatal care – proactive triage phone calls</li> <li>Perinatal mental health care - increasing opportunities for identification of those at risk</li> </ul> |
|--|--|

**Adult Mental health**

- |  |   |   |
|--|---|---|
| <ul style="list-style-type: none"> <li>Develop joint mental health strategy to promote good mental health problems and ensure early intervention</li> <li>Workplace wellbeing</li> <li>Provide the Live Well Croydon and Just Be services to improve mental wellbeing</li> </ul> | <p>Transforming community mental health provision for people with Serious Mental Illness to include:</p> <ul style="list-style-type: none"> <li>Enhance Primary Care – seamless service between primary &amp; secondary care; improved support &amp; rapid telephone advice for GPs; new primary care mental health support workers; address stigma of mental health.</li> <li>Community mental health hubs – common access to primary &amp; secondary care; provision of wide range of services (clinical &amp; social including benefits/housing/employment); link to ICNS.</li> <li>Improved integrated housing - develop wide range of housing support options (e.g. The Shared Lives Scheme)</li> <li>Connected communities – information, Local Voluntary Partnerships, including social prescribing directory of services galvanise communities, PIC support</li> <li>Self harm and suicide prevention strategy</li> </ul> | <ul style="list-style-type: none"> <li>Dementia Friendly Croydon</li> <li>Improve crisis care pathway for people in mental health crisis.</li> <li>Improve services for women with mental health issues during the perinatal period through enhanced community multi-disciplinary teams.</li> <li>Reduce physical ill-health amongst SMI population.</li> <li>Improve training and employment opportunities for people with severe mental illness</li> <li>Addressing addictive behaviours</li> </ul> |
|--|---|---|

**Alignment with Strategic Priorities**

- |                         |                               |   |                                  |
|-------------------------|-------------------------------|---|----------------------------------|
| Improve Quality of Life | Enable a better start in life | Improve wider determinants of health and well being | Integrate health and social care |
|-------------------------|-------------------------------|---|----------------------------------|

PROGRAMMES TO DELIVER OUR INITIATIVES	Stay Well	Manage Well	Greatest Need
<p><b>All Disabilities</b></p>	<p><b>All Age Disability and Adult Social Care Transformation (ADAPT)</b></p> <ul style="list-style-type: none"> <li>▪ <u>Working age people will have flexible care that they can arrange themselves and have choice and control over, achieved through e-market places, Personal budgets and direct payments</u></li> <li>▪ Transform our provision and workforce to implement locality based, multi agency working achieving seamless care for people with disabilities, with new front door</li> <li>▪ <u>Children with disabilities –Transforming our practice to provide consistent high quality and proportionate support through childhood and transition to adulthood</u></li> <li>▪ People will have Active Lives, that are asset based and co-produced with them, ensuring coherent access and promotes inclusion and resilience for people and their carers</li> <li>▪ Improve our housing offer to increase homes and housing options for people with complex health and social care needs</li> <li>▪ Implement digital pathways</li> </ul> <hr/> <ul style="list-style-type: none"> <li>▪ Implement Compassionate Croydon</li> <li>▪ Work and Health Programme</li> <li>▪ Healthy Places including appropriate housing; accessibility; growth zone</li> </ul> <hr/> <ul style="list-style-type: none"> <li>▪ Supporting local integration and provision of services for our local population</li> <li>▪ Community Led support with strength based approaches</li> <li>▪ Improving housing options</li> </ul> <hr/> <ul style="list-style-type: none"> <li>▪ Neuro rehab development</li> </ul>		
<p><b>Wider determinants of health and well being</b></p>	<ul style="list-style-type: none"> <li>▪ Implement Health, prevention and early intervention in all policies (housing, licensing, transport, planning)</li> <li>▪ Implement Air Quality strategy</li> <li>▪ Development of Growth Zone</li> <li>▪ Implement Gateway locality model</li> <li>▪ Implement Homelessness Strategy</li> <li>▪ Implement School Superzones action plan</li> </ul>		
<p><b>Modern Acute Hospital</b></p>	<ul style="list-style-type: none"> <li>▪ <u>Optimising acute pathways and improving integration</u></li> <li>▪ <u>Redesign outpatient care</u></li> <li>▪ Transforming acute provision including community facing services</li> <li>▪ Clinically sustainable hospital</li> </ul> <hr/> <ul style="list-style-type: none"> <li>▪ <u>Supporting local integrated services through repatriation</u></li> </ul> <hr/> <ul style="list-style-type: none"> <li>▪ A&amp;E transformation</li> </ul>		

**Alignment with Strategic Priorities**

Improve Quality of Life	Enable a better start in life	Improve wider determinants of health and well being	Integrate health and social care
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PROGRAMMES TO DELIVER OUR INITIATIVES	Stay Well	Manage Well	Greatest Need
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**ENABLERS**  
 A Croydon Integrated Care System

- Development of an integrated care system design options
- Development and implementation of a population health management strategy and function
- Business cases for transformation and contracting developments, including shift to outcomes
- Integrated organisational functions such as placements, safeguarding and quality
- Organisational development
- Joint NHS control total and system financial risk share agreement
- Total resource sharing and matrix working

**ENABLERS**  
 Others

- Workforce and OD**
- Develop and implement a workforce plan and organisational development programme
  - Whole system training solution
  - Deliver culture change
  - Workforce Well Being
- IT and Digital**
- Interoperability Phase 1 and Phase 2 implementation – primary & secondary care, community and acute and mental health & social care
  - IT infrastructure development
  - Development of effective System IT Transformation Board and work programme
- Estates**
- Support locality based development including New Addington Health Centre, East Croydon Growth Zone, Coulsdon Health Centre
  - Improve GP estate
  - Implement 'One Public Estate'
- Communications and Engagement**
- Communicate and engage with public, staff and stakeholders that supports the One Croydon" approach
  - Develop a method for understandin peoples satisfaction and experience of the transformation across the system
  - Information and signposting
  - Facilitate public consultations where necessary
- Finance**
- Develop whole system financial approaches
  - System Risk Share
- Contracting & Procurement**
- Design and implement contracts and appropriate procurement processes to incentivise/support models of care

**Alignment with Strategic Priorities**

Improve Quality of Life	Enable a better start in life	Improve wider determinants of health and well being	Integrate health and social care
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# The NHS Long Term Plan – a summary

**Find out more:** [www.longtermplan.nhs.uk](http://www.longtermplan.nhs.uk) | **Join the conversation:** [#NHSLongTermPlan](https://twitter.com/NHSLongTermPlan)

Health and care leaders have come together to develop a Long Term Plan to make the NHS fit for the future, and to get the most value for patients out of every pound of taxpayers' investment.

Our plan has been drawn up by those who know the NHS best, including frontline health and care staff, patient groups and other experts. And they have benefited from hearing a wide range of views, whether through the 200 events that have taken place, and or the 2,500 submissions we received from individuals and groups representing the opinions and interests of 3.5 million people.

This summary sets out the key things you can expect to see and hear about over the next few months and years, as local NHS organisations work with their partners to turn the ambitions in the plan into improvements in services in every part of England.

## What the NHS Long Term Plan will deliver for patients

These are just some of the ways that we want to improve care for patients over the next ten years:

### Making sure everyone gets the best start in life

- reducing stillbirths and mother and child deaths during birth by 50%
- ensuring most women can benefit from continuity of carer through and beyond their pregnancy, targeted towards those who will benefit most
- providing extra support for expectant mothers at risk of premature birth
- expanding support for perinatal mental health conditions
- taking further action on childhood obesity
- increasing funding for children and young people's mental health
- bringing down waiting times for autism assessments
- providing the right care for children with a learning disability
- delivering the best treatments available for children with cancer, including CAR-T and proton beam therapy.

### Delivering world-class care for major health problems

- preventing 100,000 heart attacks, strokes and dementia cases
- providing education and exercise programmes to tens of thousands more patients with heart problems, preventing up to 14,000 premature deaths
- saving 55,000 more lives a year by diagnosing more cancers early
- investing in spotting and treating lung conditions early to prevent 80,000 stays in hospital
- spending at least £2.3bn more a year on mental health care
- helping 380,000 more people get therapy for depression and anxiety by 2023/24
- delivering community-based physical and mental care for 370,000 people with severe mental illness a year by 2023/24.

### Supporting people to age well

- increasing funding for primary and community care by at least £4.5bn
- bringing together different professionals to coordinate care better
- helping more people to live independently at home for longer
- developing more rapid community response teams to prevent unnecessary hospital spells, and speed up discharges home.
- upgrading NHS staff support to people living in care homes.
- improving the recognition of carers and support they receive
- making further progress on care for people with dementia
- giving more people more say about the care they receive and where they receive it, particularly towards the end of their lives.

## How we will deliver the ambitions of the NHS Long Term Plan

To ensure that the NHS can achieve the ambitious improvements we want to see for patients over the next ten years, the NHS Long Term Plan also sets out how we think we can overcome the challenges that the NHS faces, such as staff shortages and growing demand for services, by:

- 1. Doing things differently:** we will give people more control over their own health and the care they receive, encourage more collaboration between GPs, their teams and community services, as 'primary care networks', to increase the services they can provide jointly, and increase the focus on NHS organisations working with their local partners, as 'Integrated Care Systems', to plan and deliver services which meet the needs of their communities.
- 2. Preventing illness and tackling health inequalities:** the NHS will increase its contribution to tackling some of the most significant causes of ill health, including new action to help people stop smoking, overcome drinking problems and avoid Type 2 diabetes, with a particular focus on the communities and groups of people most affected by these problems.
- 3. Backing our workforce:** we will continue to increase the NHS workforce, training and recruiting more professionals – including thousands more clinical placements for undergraduate nurses, hundreds more medical school places, and more routes into the NHS such as apprenticeships. We will also make the NHS a better place to work, so more staff stay in the NHS and feel able to make better use of their skills and experience for patients.
- 4. Making better use of data and digital technology:** we will provide more convenient access to services and health information for patients, with the new NHS App as a digital 'front door', better access to digital tools and patient records for staff, and improvements to the planning and delivery of services based on the analysis of patient and population data.
- 5. Getting the most out of taxpayers' investment in the NHS:** we will continue working with doctors and other health professionals to identify ways to reduce duplication in how clinical services are delivered, make better use of the NHS' combined buying power to get commonly-used products for cheaper, and reduce spend on administration.

## What happens next

Sustainability and Transformation Partnerships (STPs) and Integrated Care Systems (ICSs), which are groups of local NHS organisations working together with each other, local councils and other partners, now need to develop and implement their own strategies for the next five years.

These strategies will set out how they intend to take the ambitions that the NHS Long Term Plan details, and work together to turn them into local action to improve services and the health and wellbeing of the communities they serve – building on the work they have already been doing.

This means that over the next few months, whether you are NHS staff, a patient or a member of the public, you will have the opportunity to help shape what the NHS Long Term Plan means for your area, and how the services you use or work in need to change and improve.



To help with this, we will work with local Healthwatch groups to support NHS teams in ensuring that the views of patients and the public are heard, and Age UK will be leading work with other charities to provide extra opportunities to hear from people with specific needs or concerns.

## Find out more

More information is available at [www.longtermplan.nhs.uk](http://www.longtermplan.nhs.uk), and your local NHS teams will soon be sharing details of what it may mean in your area, and how you can help shape their plans.