

Report of the Director of Health and Wellbeing to the meeting of Bradford and Airedale Health and Wellbeing Board to be held on 4th September 2018.

Subject:

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‘Connecting People and Place’: A Joint Health and Wellbeing Strategy for Bradford and Airedale

Summary statement:

Updates are provided for the four outcome areas under the strategy and a proposal for tracking progress against the strategy forms an appendix to the report.

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Portfolio:
Healthy People and Places

Overview & Scrutiny Area:
Health and Social Care

1. SUMMARY

Updates are provided for the four outcome areas under the strategy, and a proposal for tracking progress against the strategy forms an appendix to the report.

2. BACKGROUND

'Connecting People and Place', the new Joint Health and Wellbeing Strategy for Bradford and Airedale 2018-23 was published on the Health and Wellbeing Board website in June 2018 (Appendix 1).

The foreword to the strategy refers to a ten year ambition to reduce health inequalities, preventable differences between different people and between different areas of the District, as well as improving health and wellbeing overall. It calls for people to work together and to be willing to do things differently in order to see a radical improvement in health and wellbeing across the District.

The Strategy has four outcomes. Each will be delivered through a strategic plan or initiative.

- Our children have a great start in life – Children, Young People and Families Plan
- People in Bradford District have good mental wellbeing – Mental Wellbeing Strategy
- People in all parts of the District are living well and ageing well – Healthy Bradford Plan
- Bradford District is a healthy place to live, learn and work – Economic Strategy, Core Strategy, Housing Strategy.

To achieve these outcomes we will create a health promoting place to live, promote wellbeing and prevent ill health, and support people to get help earlier and manage their conditions.

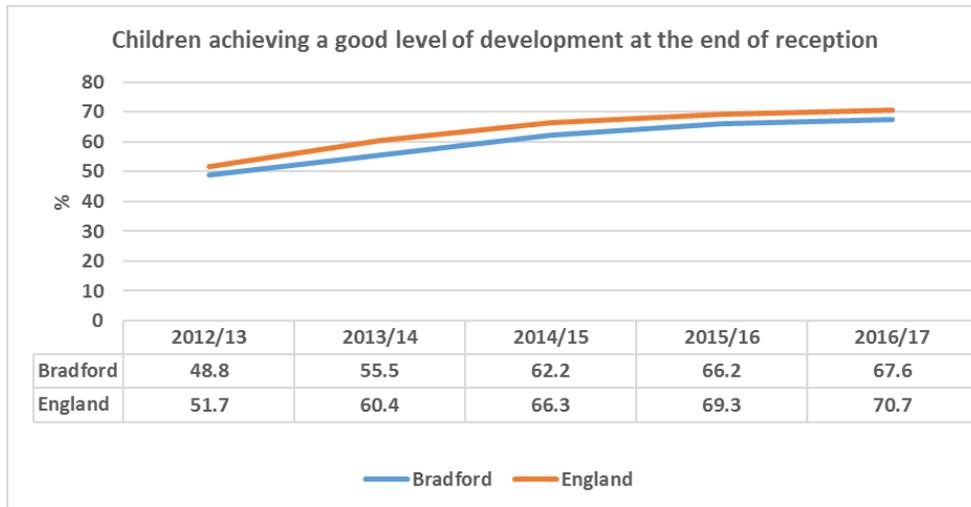
This update is organised around the four outcomes and is accompanied by a draft 'logic model' (Appendix 2). A logic model describes how each aspect of the strategy will be put into practice setting out the resources that will be used, the activities that will make a difference and how progress against the strategy's outcomes will be tracked.

The **Joint Strategic Needs Assessment** (JSNA) is being developed and is due to be published in the autumn. The JSNA provides a concise narrative of health outcomes and factors that influence health and wellbeing with chapters that are structured around the outcomes of the Strategy. This document will support commissioners to ensure services are shaped by local need.

3. OTHER CONSIDERATIONS

3.1 Outcome 1 - Our children have a great start in life

The strategy acknowledges the level of challenge to achieving good health and wellbeing for all children in the District, – reminding us that children in more deprived parts of the District have worse health and wellbeing on average, with specific challenges around infant health, dental health and healthy weight, injuries and long-term conditions such as asthma. Poor health and wellbeing impacts on children’s ability to reach their potential in life.



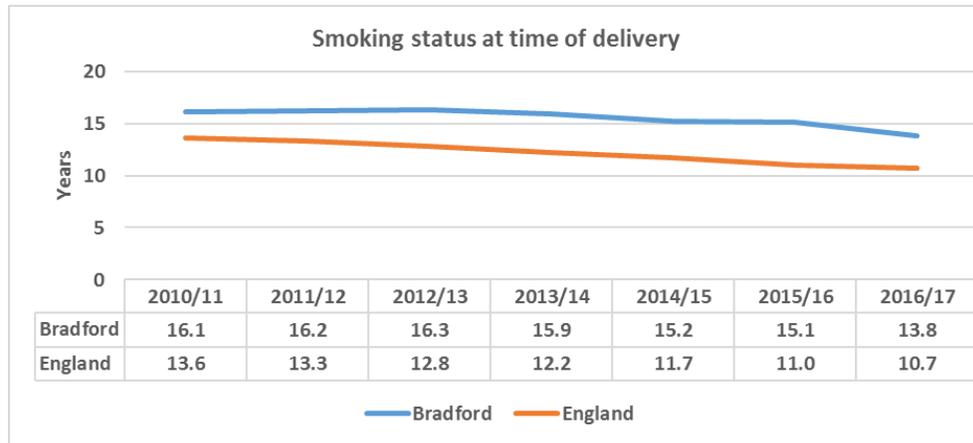
3.1.1 **School readiness.** At age five the holistic school readiness measure gives an indication of how prepared children are to succeed in school. Of the four indicators relating to school readiness the District does significantly worse than the average for England in two indicators – percentage of children achieving a good level of development at the end of reception and percentage of Year 1 pupils achieving the expected level in the phonics screening check. In recent years all four indicators show signs of improvement.

Children’s Centres focus on promoting take-up of early education in some of our most disadvantaged two year olds as a means to closing the attainment gap. The Early Years Quality Support Team has introduced annual keeping-in-touch visits to early years settings alongside developing a menu of traded training and consultancy support to ensure that the quality of early years provision remains high and makes the required difference to outcomes.

3.1.2 **Reproductive health and pre-conception.** Ensuring that women and men across Bradford District achieve and maintain good health in their reproductive years is a challenge that impacts on future health for both individuals and their children. A **Bradford Preconception Health Summit** is being considered for early 2019 in recognition that preconception and reproductive health should be about improving the general health of the whole population as an underlying philosophy of all health, education, and social care. This event is being championed by the Maternity, Children and Young People’s Partnership and will provide an opportunity to identify strengths, opportunities, barriers and risks across the health and social care system

across the District.

3.1.3 **Infant health.** The **Every Baby Matters** steering group continues to deliver the action plan to reduce the number of infants dying in the first year of life. This includes recommendations from the Infant Mortality Commission (2006) as well as local information from the Child Death Overview Panel, to ensure that risk factors are understood for the preventable and avoidable infant deaths which occur and action is taken. **Reducing smoking in pregnancy** remains a priority, with a comprehensive programme in place that starts with the identification and referral of pregnant smokers and their partners at the first antenatal appointment. Prevalence decreased from 15.1% in 2015/16 to 13.8% in 2017/18.



Recent developments have seen the introduction of an intervention at the 12 week antenatal scan, carbon monoxide screening of all women at around 36 weeks gestation and the introduction of nicotine replacement therapy on the wards for pregnant smokers admitted antenatally.

3.1.4 **Public Health 0-19 Service.** This service (to include Health Visiting, School Nursing and Oral Health services) is in the process of being re-commissioned through a competitive tender process. The procured Public Health 0-19 Service will be integrated and co-located as part of the wider Prevention and Early Help model, across the four locality footprint. The integration and co-location of these two services will enable early and effective support for parents and children when issues arise. This will be especially important during the early years as the opportunity to reduce the impact of inequalities declines as children age. It is anticipated that the new service will be in place mid-2019.

3.1.5 **Improving Oral Health.** This remains an important commitment for Bradford District, and improvements are being made to deliver the Oral Health Improvement Action Plan. Bradford has been identified as one of thirty local authority areas in England with the highest levels of dental disease in five-year-olds. However of these areas, Bradford has been highlighted as one of only ten areas to demonstrate significant improvements in reducing the prevalence of dental decay in five-year-olds, over a nine-year period (2008–2017).

Children and young people’s mental wellbeing See Outcome 2 below for an update

from the Future in Mind transformation programme under the all-age mental wellbeing strategy.

3.2 Outcome 2 - People in Bradford District have good mental wellbeing

Mental health problems are common, affecting an estimated one in ten children aged five to sixteen, and one in four adults over their lifetime. Risk factors for poor mental health include poverty, adverse life events, poor quality living and working environments, and physical ill health. The impact of poor mental health includes not only poor quality of life, but for many, a reduced life expectancy: for example, people with severe mental illness live an average of 15-20 years less than the general population. People are generally better able to take care of their physical health when they have good mental wellbeing, improving the outcomes of healthcare and increasing life expectancy.

Mental Wellbeing Partnership update. The Mental Wellbeing Partnership oversees the delivery of the Mental Wellbeing Strategy. A number of actions are being delivered under this strategy, including prevention, early diagnosis and intervention, and the transformation of acute care services.

- 3.2.1 **Suicide prevention** Bradford's action plan is focusing on high risk groups, providing better information and support and using national insight, in line with national areas of action. Self-harm prevention has also been identified as a local priority within this action plan.
- 3.2.2 **Psychological therapies.** Self-referral to MyWellbeing College is now in place. The reach of this service has expanded across different partners and agencies, improving inclusion. Models of delivery include telephone support, web-based support and work books.
- 3.2.3 **Integrated mental and physical health care** is focussing on embedding early psychological screening and interventions in physical healthcare pathways to pick up mental wellbeing issues, improve outcomes and reduce unnecessary or harmful interventions. Action learning workshops have focused on eating disorders and dementia support with GP and practice groups. Discussions are on-going about targeting more health checks on people with serious mental illness, learning disability and autism, to improve their physical health.
- 3.2.4 **Acute care.** Transformation of the pathway is underway, with a multiagency working group creating an adapted version of the CORE 24 approach, which includes the use of the current acute care pathway system within the safer spaces network. Partners are continuing to work together to look at the expansion of the acute care closer to home offer and the use of safer spaces. In addition, increased investment has allowed expansion of the **early intervention in psychosis** (EIP) service. All patients aged under 65 with first-onset psychosis now receive a NICE-approved care package, with over 50% of mental health service users seen within 2 weeks of referral.

3.2.5 **Community mental health.** Transformation is also underway of the community mental health team, who are moving towards a recovery and prevention model, providing improved care closer to home and making more use of community resilience approaches. A new assessment team and process is in place and workforce development in design.

Future in Mind update. Work streams within Future in Mind: the Children and Young People's Mental Wellbeing Transformation Plan include:

3.2.6 **Mental Health Champions** in schools which provides support for low level mental health needs. There are 74 schools signed up so far, and attending regular network meetings. Training has been provided for them, funded by the Anna Freud centre.

3.2.7 **Prevention and early intervention.** This is further supported by the Wellness Recovery Action Plan (WRAP) service: a 10-week course emphasising self-care, resilience building and peer support; and Primary Mental Health Workers (PMHWs), who are based in LA-led Early Help hubs and aligned to school nursing teams. PMHWs can deliver brief interventions and support for children and young people and their families, support and empower staff in schools, and act as a conduit for specialist CAMHS referrals.

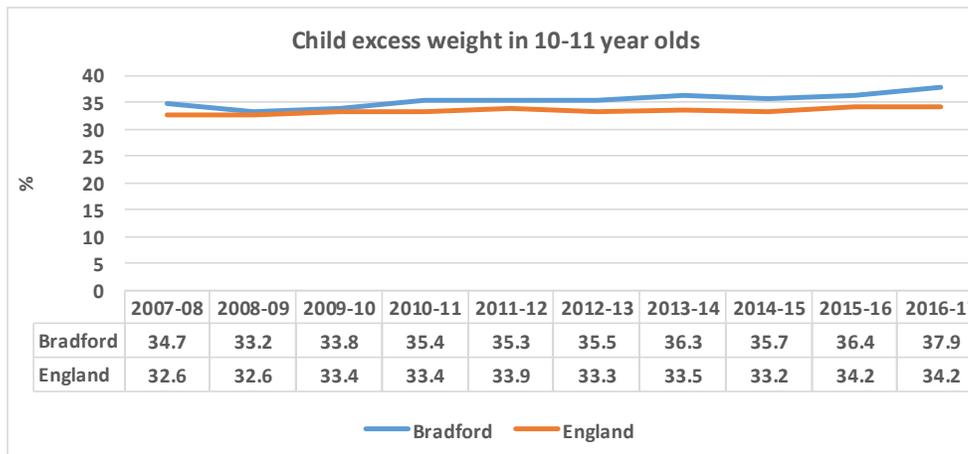
3.2.8 **CAMHS.** For children and young people requiring further assessment and intervention, the average waiting time from referral to CAMHS to treatment has significantly reduced since baseline measures in September 2017, to 108 days in quarter 1 of 2018/19, from 121 days at baseline. The First Response Service provides a single point of access 24 hours a day for referrals, including self-referrals for urgent and emergency mental health needs for children and young people. Safer Spaces provides a one-night stay in a safe, non-clinical space for children and young people aged under 18, who are at risk of a mental health crisis or emotional distress, work is underway to expand provision from 10am-10pm to 5pm-10pm provision.

3.2.9 **Youth in Mind** In order to support young people through their mental health journey, the Youth in Mind model was designed by young people, and provides them with a consistent named worker. Youth in Mind uses a range of ways to engage young people including drop-ins, one to one and peer support work through Buddies, WRAP group work led by Barnardo's, MYMUP's digital self-help tool, evidenced based peer support groups and longer term volunteer mentoring. This group has also established 'Children and Young People's Mental Health in Hospitals', which equips paediatric and adult hospital staff with the skills to support under-18s who have mental health needs in BRI and Airedale General Hospital.

3.2.10 **Vulnerable children and young people.** A number of projects are on-going to care for the most vulnerable children and young people in Bradford. An enhanced model of CAMHS service provision for looked after and adopted children has been developed and is in the process of being implemented. To address the mental health and psychological support needs of refugee and asylum seeking children in Bradford, Bevan Healthcare are delivering both one-to-one counselling sessions and a range of activities, such as fun days, football, cook and eat sessions, and

homework club, among others. A new specialist team for perinatal mental health is now operational and taking referrals.

3.3 Outcome 3 - People in all parts of the District are living well and ageing well



A Healthy Bradford Plan has been developed through a series of engagement events, supported by Leeds Beckett University, and involving many organisations from across the District. The starting point was the Health and Wellbeing Board’s request to review the established approach to obesity in the District. The Board later endorsed developing a whole system approach to address a wide range of causal factors and use a range of different approaches to support people to feel more in control of their own wellbeing.

The Healthy Bradford team, working in close partnership with the Self Care and Prevention Programme is now establishing a programme of works to address the root causes of unhealthy lifestyle behaviours. The current focus has been predominantly covering unbalanced diets and physical inactivity. Thirty-seven schools across the District are now doing the **Daily Mile** with their pupils. In July a pilot of the ‘Beat the Street’ approach to getting people physically active took place. The evaluation will report in October but provisional figures show more than 2000 people taking part over a six week period.

The team are developing core work streams which are currently coming to fruition. These include:

3.3.1 The Living Well Brand/Campaign and Social Movement. The purpose of this work is to provide a single partnership brand for health messaging and identification of healthy lifestyles and activities. The voice of the brand will provide consistent key messages supporting improved health knowledge, health literacy and prompt community led motivation and inspiration to participate in healthier lifestyles. The messages will also be consistent with the voice of national campaigns including Change 4 Life and One You. The brand design has now been established and the detail of the brand feel and voice is being worked up. A joint communications officer will shortly be in post and the public aspect of the campaign and social action/

movement for health starting later this year.

- 3.3.2 **The Living Well Service.** This holistic lifestyle support service will be available to the district via GP and self referral from January. Working closely with Sport and Leisure the service will offer personalised advice, support and motivational interviewing across the district to support people in making a change towards living a healthier lifestyle.
- 3.3.3 **The Living Well Charter.** This is a framework under development to support and incentivise businesses and schools to create a healthy environment for their employees, contractors and pupils. This is intended to launch alongside the service in January 2019.
- 3.3.4 **Smoking reduction.** Two developing work programmes have identified reducing smoking as a priority. **Bradford Breathing Better** aims to improve respiratory health outcomes for children, young people and adults in Bradford with COPD or asthma. Public health is working in partnership with CCG colleagues to ensure smoking cessation is embedded into referral pathways. In the run up to Stoptober a Bradford Breathing Better health bus will target areas and communities across the district to engage with smokers and their families to support a quit attempt and to discuss the importance of a smokefree home.
- 3.3.5 A **Cancer Alliance** funded programme has identified Bradford as one of its sites to tackle lung cancer. One of the four work strands is to support smokers to quit, including those already receiving treatment in the NHS for smoking-related illnesses. This programme creates the opportunity to establish a local health and care partnership with the programme lead for Bradford now recruited and in post from the beginning of September.

3.4 Outcome 4 - Bradford District is a healthy place to live, learn and work

Our wellbeing is influenced by the quality, safety and condition of our built environment – our housing and other buildings, workplaces, streets, parks and other communal spaces - whether we feel safe in our local environment, in our streets and workplaces and how connected we are to people in our local neighbourhood. Cold, damp, unsafe houses increase the risk of illness and injury, new, better housing and remediation of existing stock are the main ways to address this. Poor air quality in some areas is a risk to people's lung and heart health and to children's healthy start and again needs action. We are taking action on each of these areas:

- 3.4.1 **Planning for the future.** A successful joint bid to the Design Council provided access to its 'Design in the Public Sector' (DiPS) programme for the Council's Health and Wellbeing and Place Departments. This four month programme provided a series of workshops and ongoing support to identify and shape joint areas of work between the two departments. To date these include: embedding a strong focus on improving health and wellbeing in the tender for the District's first Housing Design Guide and Top of Town Masterplan.

3.4.2 **Evidence review.** A comprehensive review of evidence on what makes a healthy place has been undertaken and draft principles developed, to shape discussion and planning for a healthy place. These will be tested initially at a joint learning session in October. Public Health have facilitated links between the planning team and the Born in Bradford (BiB) team. This will support the Masterplan and Housing Design Guide projects to understand what children and young people think about the area in which they live, and what a Healthy Place looks and feels like to them.

Public Health attend the Planning ‘majors meeting’, providing evidence-based input, at an early stage of the planning process, on how individual developments can have a positive impact on health and wellbeing.

3.4.3 **Green Space.** The Born in Bradford cohort study has added to the growing evidence base about the positive impacts of access to green space on wellbeing. Their studies that show that access to green space has a positive impact on the mental wellbeing of both pregnant women and young children, and that the quality of green space is as important as the quantity. The Better Start Bradford programme has worked with the Council’s landscape architecture team to map green space in the programme area, providing a baseline for discussions with communities about where children can play, and to look for opportunities to create pockets of green space where it is lacking. The Council’s Place department is preparing bids for grant funding to bring additional resource into the District to improve green infrastructure along the Canal Road corridor and in Horton Park. An update on use of open and green space for reasons of health is scheduled at the Regeneration and Environment Overview & Scrutiny Committee in early October.

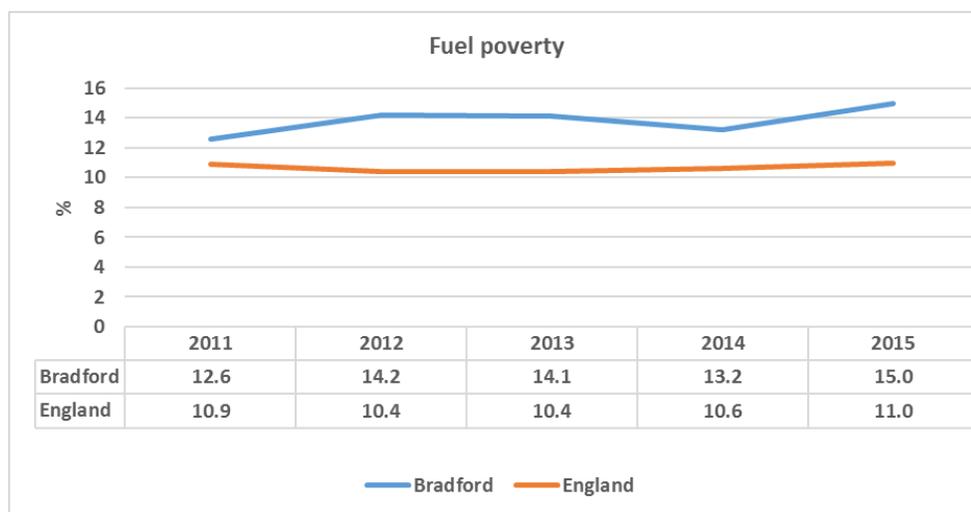
3.4.4 **Air Quality.** Work in Bradford to drive forward improvements to address air quality issues has included the adoption of the Low Emissions Strategy in 2013 when Bradford was the first city in West Yorkshire and the second in the country to adopt a Low Emission Strategy aimed at reducing air pollution and improving health in the district. Bradford has since worked collaboratively with neighbouring Councils, the Combined Authority and Public Health England to lead development of the West Yorkshire Low Emission Strategy (2016) which develops policies to improve air quality, including; planning guidance which ensures charging points, fleet standards and damage-cost equivalent air quality mitigation on all relevant schemes, bus standards, taxi licensing commitments, procurement guidance to reduce emissions and regional bids for emission reduction funding, such as bus retrofitting and Ultra-Low Emission Vehicle taxis.

The collaborative approach ensures consistent and tangible air quality improvement across the region, supported by local health professionals. Implementation has also included reviewing the road transport systems in urban areas, encouraging cost effective ways for people to make greener vehicle choices, car sharing initiatives and the promotion of cycling, walking and uses of public transport.

In May, Bradford, along with 32 other Councils, received a ministerial direction requiring investigation into whether there are any further measures that can be taken that will bring forward full compliance with legal requirements. This work has now been submitted to the Defra/DfT Joint Air Quality Unit and we expect that the

outcome will form part of the Government’s amendment to the national strategy to reduce pollution from road vehicles launched last year. It is expected to be available to the public later this year.

3.4.5 Employment and skills. The Better Futures programme is a DWP-funded programme that aims to help more vulnerable community members into work and to continue to provide support whilst they are in work. It is being delivered by ‘Reed in Partnership’ across the Bradford District (as part of a larger North of England contract). Partners from the VCS and public and private sector organisations met with Reed in Partnership in July to discuss the purpose and implementation of the programme, how to align with similar programmes to avoid duplication and inappropriate referrals, and how to and access support available from existing projects to help their service users and vice versa. The group will meet again in September to continue the dialogue.



3.4.6 Anti-poverty work. Welfare advice services, provided by four VCS partners and funded by the Council’s Health and Wellbeing Department are continuing to transform services including to extend access options through development of internet and webchat services. The Council’s customer contact services staff are partnering with welfare advice providers to streamline Universal Credit applications and fast-track applicants in need of formal debt counselling to welfare advice providers’ co-located in Council sites during the rollout of Universal Credit. The Council’s training unit/Revenues and Benefits team are providing universal credit training packages to key staff in the VCS and CCGs. An Anti-poverty strategy is now in place, with an anti-poverty board working to realise the strategic outcomes. An established winter warmth programme - Warm Homes - procured in 2017/18 for two years offers specific help to vulnerable households, which on top of a range of practical interventions, includes help with energy bills, debt and fuel poverty issues.

Comprehensive performance reporting for the strategy is in development.

4. FINANCIAL & RESOURCE APPRAISAL

The Joint Health and Wellbeing Strategy sets the direction and provides a broad framework for decisions about the use of resources for the health and wellbeing sector across the District. A finance and resource update will be provided as part of a separate agenda item.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

The Health and Wellbeing Board owns, leads and provides governance of the strategy. Risk will be managed by the Integration and Change Board through a performance management framework with regular reporting to the Health and Wellbeing Board.

6. LEGAL APPRAISAL

No legal issues

7. OTHER IMPLICATIONS

7.1 EQUALITY & DIVERSITY

The strategy aims to reduce health inequalities which in some instances can disproportionately affect people with protected characteristics under the Equality Act 2010. As such the Strategy aims to make a positive contribution to people with protected characteristics.

7.2 SUSTAINABILITY IMPLICATIONS

The draft strategy will support and build on the work at local and West Yorkshire-Harrogate level to ensure that services become sustainable within the available budget for health and wellbeing by 2020.

7.3 GREENHOUSE GAS EMISSIONS IMPACTS

No direct implications. Implementation of the strategy will involve co-ordinated action to increase physical activity levels and active travel in the District which may have some impact on greenhouse gas emissions if the number of car journeys were to decrease as a result.

7.4 COMMUNITY SAFETY IMPLICATIONS

No direct implications, however community safety is an enabling factor, allowing people to engage in community activities, and to use streets and neighbourhood amenities for physical activity. Reduced social isolation and increased physical activity will both act to enhance wellbeing.

7.5 HUMAN RIGHTS ACT

No direct implications.

7.6 TRADE UNION

No direct implications.

7.7 WARD IMPLICATIONS

In areas with poorer health and wellbeing and higher levels of health inequalities different approaches may need to be developed to accelerate improvement in health and wellbeing and to reduce health inequalities.

8. NOT FOR PUBLICATION DOCUMENTS

None.

9. OPTIONS

No options are provided.

10. RECOMMENDATIONS

That the Board receives the update and provides feedback for further action.

11. APPENDICES

11.1 Connecting people and place for better health and wellbeing. A Joint Health and Wellbeing Strategy for Bradford and Airedale 2018-2023. <https://bdp.bradford.gov.uk/media/1332/connecting-people-and-place-for-better-health-and-wellbeing-a-joint-health-and-wellbeing-strategy-for-bradford-and-airedale-2018-23.pdf>

11.2 Logic Model - Tracking Progress for the Joint Health and Wellbeing Strategy for Bradford and Airedale 2018-2023.

12. BACKGROUND DOCUMENTS

1. Happy, Healthy and At Home - Health and Care Plan for Bradford District and Craven <https://bdp.bradford.gov.uk/media/1329/happy-healthy-and-at-home-our-plan-draft.pdf>
2. Agenda item 8. Report on Air Quality and the fraction of mortality attributable to particulate air pollution across the Bradford District. Meeting of the Environment and Waste Management Overview & Scrutiny Committee, 26 September 2017.