

HEALTH & WELLBEING BOARD

Subject Heading:

Health Improvement Report (2018)

Board Lead:

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The subject matter of this report deals with the following themes of the Health and Wellbeing Strategy

- Theme 1: Primary prevention to promote and protect the health of the community and reduce health inequalities
- Theme 2: Working together to identify those at risk and intervene early to improve outcomes and reduce demand on more expensive services later on
- Theme 3: Provide the right health and social care/advice in the right place at the right time
- Theme 4: Quality of services and user experience

SUMMARY

The attached report (in draft) was previously provided to the Health and Wellbeing Board in readiness for the September 2018 meeting, but was deferred to January 2019.

The Health Improvement Report (now presented as a final version) is particularly useful for this meeting of the Board as it illustrates how the Council has broadened its preventative approach to tackle the wider determinants of health, and health behaviours and lifestyles; both summarised in the Kings Fund Report framework for population health pillars 1 and 2 - the paper that preceded this agenda item.

RECOMMENDATIONS

The Board is asked to consider and comment on the report in the context of the Kings Fund Report that preceded this agenda item.

REPORT DETAIL

The Health Improvement Report summarises the activities that have been undertaken by the Public Health Service in collaboration with other Council services, and in partnership with a range of organisations; primarily focusing on the eighteen month period to August 2018. The report illustrates where the Council has used its public health grant and resources¹. to broaden the approach to prevention of poor health.

The report sets out the health improvement activity under three headings which directly relate to the first two pillars described in the Kings Fund paper *A vision for population health, Towards a healthier future*:

Health Improvement Report	Kings Fund paper
Section 1: Putting health and wellbeing into all policy, systems and partnerships	Pillar 1
Section 2: Commissioning health improvement services	Pillar 2
Section 3: Social marketing for behaviour change	Pillar 2

Eighteen separate programmes of work are summarised with an illustration regarding where the different programmes are interlinked with each other, with other services, and with Council public health priorities. Following are examples of some of the achievements from the past eighteen months which are explained further in the report:

- Public Health and Planning worked together on health impact assessment of the Local Plan. This showed that it is possible to take a very practical approach to health in all policies, and this led to further interest in assessing other strategies and policies for their impact on health (Pillar 1)

¹ Approximately 9fte officer time is directed on health improvement activity, and the remaining 8fte split between health protection and service improvement.



- Health champions delivered a range of health improvement activities and attended over 100 events, raising awareness about priority health issues, including mental health, cancer, physical activity, smoking, alcohol and healthy eating – trainee GPs worked with health champions on an outreach project in Romford town centre (Pillar 2)
- A suicide prevention approach across BHR commenced, led by LBH public health (Pillars 1 and 2)
- The health and wellbeing in schools service has supported schools to achieve Healthy Schools London awards, and has delivered training to school staff on a range of health and wellbeing topics. The service is supporting schools to prepare for new curriculum content on Sex and Relationship education. (Pillars 1 and 2)
- Havering was one of just six London boroughs to participate in Healthy Early Years London pilot, with eight awards achieved during the pilot phase (Pillars 1 and 2)
- In partnership with Early Help and NELFT, *starting solid foods* workshops designed to help parents to confidently wean babies onto solid foods; sessions commenced in January (Pillar 2)

IMPLICATIONS AND RISKS

None

BACKGROUND PAPERS

None