“Waltham Forest: Healthy, happy and thriving together”
As Chair of the Health and Wellbeing Board, I am pleased to introduce our new Joint Health and Wellbeing Strategy. Everything that we do as a Board will be based on this Strategy, and it will help us to make sure that we are improving and progressing.

The health and wellbeing of our local population is my major concern – I want to make sure that everyone who lives in Waltham Forest is happy, healthy, and thriving. To do this, the council, CGG and other local organisations will have to work together and be ambitious and innovative. We must make sure that health and wellbeing are at the heart of the decision making processes of the council and others.

People’s behaviours – whether they smoke, eat healthily and exercise, drink, and so on – impact on their health. But the circumstances in which people live are also highly important. Issues such as poverty, housing and employment can make a big difference to how healthy and happy people can be. People’s mental wellbeing is incredibly important, and this strategy places equal emphasis on mental and physical health and wellbeing.

We are all aware of the current financial climate, as well as the increasing pressures on our local services. While this poses a great challenge, it also gives us a great opportunity to develop ways of working together with our health colleagues and other partners, to develop effective and responsive services that best meet the needs of our local population.

I am proud to be part of a diverse and resilient population here in Waltham Forest, it is a wonderful place to live, work, and raise a family. I believe that we have the potential to work together as local people to make sure that all individuals, families and communities thrive.

Cllr. Ahsan Khan
Chair, Health and Wellbeing Board
I am the Chair of NHS Waltham Forest Clinical Commissioning Group (CCG), the organisation responsible for buying (or commissioning) many local healthcare services. This includes urgent and emergency care, mental health, hospital services, GP services and community health services.

We work with Waltham Forest residents and health and social care organisations to make decisions about how NHS money should be spent in our borough, then we make sure those services are of high quality.

When designing local health services, patients and carers must be at the centre of everything we do. It’s only through listening to them and acting on what they tell us that we’re be able to make sure services are meeting the changing needs of our diverse local population.

We also want to make sure local people are as healthy as possible, and that if they do need help they are treated quickly. For this to happen, people need to be given the right information and support to look after their own health, with appropriate input from healthcare professionals.

This Joint Health and Wellbeing Strategy is our vision for how we’re going to help people in Waltham Forest stay as healthy as possible.

I look forward to working in partnership with other local organisations, particularly Waltham Forest Council, to make sure we meet the ambitions set out in this strategy; and I would encourage everybody to get involved in shaping your local health and care services – your input will make Waltham Forest an even healthier, happier place to live.

Dr Anwar Khan
Local GP and Chair, Waltham Forest CCG
INTRODUCTION

This Strategy is based on a strong belief that Waltham Forest is a fantastic place to live and work – that the population is resilient, strong and capable, and that local growth and regeneration can benefit all. It hopes to recognise and build on all of the great things that are happening locally.

This is a Strategy for our Health and Wellbeing Board, and it will guide our decisions and priorities over the coming years. We aim to build on local action and improve the health and wellbeing of the population. The Strategy includes areas of action for the NHS, public health, and the wider council and local health and social care system.

The Strategy is for everyone in the local community. To make sure that we represent all those who live in Waltham Forest, we have shared our thoughts and heard feedback and comments from many local groups and individuals. All of the pictures used in this report are local too, taken in the borough over the last two years. We have made sure that what is included here builds on and is fully integrated into other work going on locally, including the Better Care Together programme, Transforming Services Together, and a range of council and Clinical Commissioning Group strategies and programmes. We have combined the voices from the community, the priorities set out in these documents, and the best evidence available to us from nationally or locally gathered data such as the Joint Strategic Needs Assessment, in order to produce this document.

The central goal of the Health and Wellbeing Board, and this Strategy, is to improve health and reduce inequalities. To do this, we have focussed on three main groups:

1. From conception to age 18
2. Working age adults
3. Older people and protecting our communities

For each of these groups, we have provided a snapshot of where we are now, explained why action in this area is important, and set out our aims and ambitions for where we want to be in 2020. We have then set out our actions – what we are going to do to meet our aims and ambitions – and given some performance indicators to show how we will measure whether or not we have been successful.

In order to inform delivery and implementation, we have also produced a ‘living’ document, available online, which sets out our metrics and targets, and provides more specific detail on the actions that we will be taking over the next five years. Progress against this implementation plan will be regularly
reported to the Joint Health and Wellbeing Board, so that we know if we have been successful in achieving all that we have set out here. We welcome feedback, input and comments from anyone who is using or reading this Strategy.

Dr Andrew Taylor  
Director of Public Health, London Borough of Waltham Forest

Terry Huff  
Chief Officer, Waltham Forest CCG

February 2016
OUR KEY PRINCIPLES AND PRIORITIES

Working with the community
The people of Waltham Forest have many strengths and ways of helping themselves and others to be healthy, happy and thriving together. We will continue to listen and work with local people to make the best use of these strengths, to support community groups, and to take actions based on what we hear from them. This will include talking to people of all ages and walks of life, especially children and young people and those in seldom-heard groups. A range of community groups has been involved in developing this Strategy.
Integrating health and social care

Our residents tell us that they don’t want to have to repeat themselves when talking to care providers. They want care that is personalised and to stay as independent as possible for as long as possible in their own homes. To make this happen we are bringing together our social care and health systems to work in a seamless way that will ensure people get coordinated support in their home, only go into hospital when they really need to, and will stay there no longer than necessary. In short, we think that we can do better for our local residents when we work together. We are putting some of our ‘health money’ and ‘social care money’ together into a single fund called the Better Care Fund, to get the best value for the money we collectively spend. Our local partnership work brings together all parts of the NHS, Council, voluntary sector, service users, Healthwatch, patients and their families, to coordinate health and social care integration and to test the benefits of our joint working. We will also work through the Transforming Services Together (TST) programme to ensure a collaborative approach to joint challenges, to share resources and to plan strategically for the future. This programme works jointly across the NHS in Tower Hamlets, Newham and Waltham Forest.

Prevention and early intervention

As well as providing excellent care for those who fall ill, our ambition is to expand and further integrate our early intervention and prevention efforts – those services that stop people becoming ill in the first place and that support people to achieve the best for themselves and their families. In some cases, it is important to target those we know are most at risk, but intervention and early prevention are also very important across the whole community. This is better for individuals and also saves money in the long term. Data from 2011–13 shows us that on average 299 people died each year in Waltham Forest from causes that were considered to be ‘preventable’. Some of these deaths would be avoided by early intervention to keep people healthy.

Reducing inequalities and tackling the wider determinants of health

Both the Council and NHS Waltham Forest Clinical Commissioning Group (CCG) have the twin aims of improving health and reducing health inequalities. Health inequalities are the differences in people’s health that exist across society, where people and families who have more power, money or other resources tend to lead longer, healthier lives. In order to tackle these inequalities, and help all residents of Waltham Forest to have lives as healthy as the most privileged, it is essential to improve the conditions and surroundings in which people are born, grow, live, work and age. We will continue to integrate our services to achieve this aim.

Accountability and scrutiny

To show how serious we are about making these changes, we want to be held to account by the public on how well we are doing. We will ensure that our plans are monitored and we will follow up on them regularly and strictly, through progress reports that will be scrutinised by the Health and Wellbeing Board (HWB) every year, using the performance indicators we have set out in this document. Each area of work will have a named lead, and the HWB will make information on how well we are doing publicly available. Within each programme area, we will make sure that oversight is in place to protect the public, and that the money we spend is used in the best possible way.
Parity of esteem between mental and physical health, and an increased focus on mental wellbeing

Historically, mental ill health has not received the same level of attention or resources compared with physical ill health. Yet many people have both a mental and physical health problem at the same time, and having one can also make the other worse. The HWB is committed to providing equal support for both physical and mental health across the borough, meaning that residents can be reassured about having the same expectations of support whatever the problems they face. Aside from mental illness, it is also essential to increase our focus on promoting good mental health and wellbeing so that people are supported to lead happy and fulfilling lives.
WHAT MATTERS TO PEOPLE

Source: All of the following are quotes from members of the community who took part in focus groups or gave feedback on the Strategy through the consultation run by Healthwatch.

- Support for new mums, and be family focused – looking at positives not just negatives.
- Good housing, suitable for people’s needs; good open spaces that are safe.
- Opportunities and experiences. Keeping physically and mentally fit.
- Diversity and fairness.
- Activities that make people feel useful, belonging, and give them companionship.
- Patient centred wellbeing rather than ill health.
- Resilience – build young people’s confidence. Continuing educational experiences.
- Provision of affordable and sociable activities. Independence with a network of friends and family to offer support.
- Recognising that everyone is unique and individual.
- A more efficient community with better communication, trust, understanding and empathy.
- Independence with a network of friends and family to offer support.
WALTHAM FOREST’S ONE PAGE HEALTH AND WELLBEING STRATEGY
This will be a borough where people can live a healthier and longer life

<table>
<thead>
<tr>
<th>The Best Start in Life</th>
<th>Healthy, Longer, Happy Lives</th>
<th>Thriving Maturity and Protected Community</th>
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<tbody>
<tr>
<td>Develop, thrive and achieve</td>
<td>Prosperous, active and sustainable</td>
<td>Safe, supported and independent</td>
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</tbody>
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- **Mothers-to-be will be supported and cared for to ensure their own good health, and the health of their baby.**
- **More babies, children and young people will have improved health and wellbeing.**
- **More children will be ready for school and have language and social skills to flourish in school.**
- **More families will be living in decent homes with good opportunities for work, and fewer children will be living in poverty.**
- **More young people will feel they have control over their lives and the choices they make.**
- **More young people will leave education with qualifications and skills to fulfil their aspirations.**
- **Children and young people’s mental health and resilience will be supported.**
- **Children living in poverty, in care, or those with special educational needs or disabilities will flourish and inequalities in their outcomes will be reduced. Safeguarding of vulnerable children will be ensured.**
- **Local organisations will focus on the whole family, and support the ties between generations.**

- **More people will be in good quality secure jobs, which pay enough for healthy living; debt will be reduced; income inequalities will decrease.**
- **People will be supported to make healthy lifestyle choices, in order to promote good health and prevent the development of illness.**
- **Growth and regeneration will benefit all residents and improve their health and wellbeing.**
- **Communities will be strong and resilient; participation in community life will be easier, and people will feel connected, involved and valued.**
- **More people will live in a decent quality home with good open space nearby. Fewer people will be homeless.**
- **More people will be living and working in safe, energy-efficient places, breathing cleaner air in safer streets.**
- **Positive mental health and wellbeing will be promoted, and local services and their staff will be protected and supported. People will feel more confident to discuss and seek help for mental health problems.**
- **Inequalities in health outcomes will decline, and the mental and physical health of vulnerable, excluded or disabled residents will improve. The needs of particular groups will be recognised and met.**
- **Health and social care will be more integrated and have a greater focus on prevention.**

- **Fewer older people will feel socially isolated, and more will be actively participating in community life.**
- **Older people will be independent and able to make decisions about the health and social care services they receive. More people will be able to have end of life care at home, rather than dying in hospital.**
- **Fewer older people will experience falls, and those who do will be enabled to feel confident in independent living.**
- **There will be more early prevention and detection, and coordinated care, of mental ill health in older age.**
- **Individuals and communities will be protected during events that impact on their health and wellbeing, such as weather, climate change and health emergencies.**
- **There will be excellent primary care with longer opening hours, in an atmosphere of respect, care and support.**
- **Local people will have access to a sustainable general hospital that delivers excellent care and shares its expertise with community health and social care services.**
- **More people will receive high quality community health services that enable care at home.**
- **Patients will be enabled to use digital technology and other means to support self-care.**
- **All those in need of care will be well, independent and resilient.**
- **Adults who have long-term conditions or communicable diseases will be known to services, supported and taking action to manage their condition or mitigate harm.**
137 young people were admitted to hospital as a result of self-harm in one year (2013/14), and an estimated 3,830 5–16 year olds had a mental health disorder (2014).

3.9% of babies were born with low birth weight in the borough in 2012. The lowest in London was 1.6%.
**Why is this important?**
The early years of life – from conception to entering adulthood – are critical for wellbeing later on. During pregnancy there are opportunities to ensure a safe birth, and promote healthy behaviours. Good support in the early years is vital in helping parents access support for their child’s needs, but also for employment opportunities and housing – which are requisites for reducing child and family poverty. Schools can provide a healthy and supportive environment to learn in, improve the health behaviours of children and young people, give them the strength to cope with adversity, and ensure high levels of achievement and ambition to help chances throughout life.

**How will we know if we are making a difference?**
Mothers-to-be will be supported and cared for to ensure their own good health and the health of their baby.

More babies, children and young people will have improved health and wellbeing.

More children will be ready for school and have the language and social skills to flourish in school.

More families will be living in decent homes with good opportunities for work, and fewer children will be living in poverty.

More young people will feel they have control over their lives and the choices they make.

More young people will leave education with the qualifications and skills to fulfil their aspirations.

Children and young people’s mental health and resilience will be supported.

Children living in poverty, in care, or those with special educational needs or disabilities will flourish and inequalities in their outcomes will be reduced. Safeguarding of vulnerable children will be ensured.

**What will we do?**
Implement a maternity strategy that encourages and promotes midwife-led care, ensures continuity of care, promotes healthy behaviours and provides support for mothers’ mental health.

Deliver the healthy child programme and ensure excellent and coordinated primary care provision across the health system from birth to adulthood, including high quality support for families from health visitors, the family nurse partnership, GPs (including immunisations and six-week baby checks) and midwives (including screening). Implement a flu plan that will target pregnant women and children. Tackle childhood overweight and obesity through effective partnership work and early intervention, and improve children’s dental health with a focus on sugar.

Work with Children and Family Centres to ensure that, as well as an improved focus on health, they offer complete support to parents, including fathers, over early education, parenting, and parents’ own needs around child care, housing, employment and more. Improve support for childhood development, including through the provision of speech and language therapy.

Work in partnership to ensure families have access to decent and affordable housing, and employment and training opportunities.

Develop a young people’s health and wellbeing service to provide a range of services for teenagers, enabling them to access help around sexual health, mental health and other issues in a way that suits them.

Work to ensure good schools for all, which work in partnership with parents and family members, to promote resilience, confidence and ambition, improve results, and reduce inequalities in outcomes. Extend the Healthy Schools London programme and provide extra support for Personal, Social, Health and Economic (PSHE) education to enable more schools to promote healthy behaviours and improve wellbeing.

Build on the joint Child and Adolescent Mental Health Services (CAMHS) transformation plan to create a children and young people’s mental health service that responds to needs, provides more support at an earlier stage and focuses on known vulnerable groups such as young offenders.

Improve transitions between services and life stages – for example, from school into training or from children’s to adults’ services. Increase integrated health and social care for children and young people, and ensure safeguarding for vulnerable children. Work to ensure those children and young people with special educational needs or disabilities and their families are included, supported, and their needs are met as per the local Special Educational Needs and Disability (SEND) vision.
Local organisations will focus on the whole family, and support the ties between generations. Continue to take a Think Family approach, and work through the Early Help and Troubled Families initiatives to ensure that support focuses on the whole family, especially those with extra needs. Continue to work in partnership to realise a joint vision, including through the Integrated Care for Children Board and the Children’s Health and Wellbeing Board. Work with other local NHS organisations through the Transforming Services Together Programme, to improve maternity care, mental health services for pregnant women, children and young people, and increase integrated services for children and young people.

Performance measures will include:

- Low birth weight babies
- Childhood overweight and obesity
- Child poverty
- Children’s mental health outcomes
- Vaccination rates among pregnant women, babies and children
- 5-year-olds’ level of development (readiness for school)
- Hospital admissions for young people as a result of alcohol, substance misuse and self-harm
- Outcomes for children with special educational needs and others known to be vulnerable
- Breastfeeding rates
- Teenage pregnancy
- GCSE results
OUTCOME 2. HEALTHY, LONGER, HAPPY LIVES: PROSPEROUS, ACTIVE AND SUSTAINABLE

16

The proportion of new prisoners who were not known to community treatment in Waltham Forest at 65.1% is the second highest out of the London boroughs. The London average is 57.1%; the England average is 46.9%.

Approximately 256 people in Waltham Forest die each year due to smoking (2011-13 data).

Of the 51 suicide deaths in the borough between June 2011 and June 2014, 60% were in the most deprived 40% of wards.

625 adults (aged 18 – 64) with a learning disability are known to the Local Authority in Waltham Forest (2013/14 data).

In 2014, Waltham Forest residents earned on average £541.80 a week (full-time employees). This is the third lowest figure in London; only Barking & Dagenham and Newham have lower wages.

2012/13 data

The proportion of new prisoners who were not known to community treatment in Waltham Forest at 65.1% is the second highest out of the London boroughs. The London average is 57.1%; the England average is 46.9%.

2,366 domestic offences were recorded in the 12 months to August 2015. Nationally, domestic violence accounts for 29% of violent crime; in Waltham Forest it is 41%.
Why is this important?
Unemployment, wages, and type of employment are all factors that have clear links to maintaining and improving health. Similarly, our local communities, and the regeneration that takes place within them, provide opportunities to improve health and wellbeing and build community resilience and strength. Much behaviour that impacts on health is cemented during adulthood and is connected to the factors mentioned above. We must provide effective support to help people to reduce unhealthy behaviours within the situations people live. A health and social care system that is focused on prevention and integration can reduce the level of disease, and improve recovery, treatment and management for those with long-term conditions.

How will we know if we are making a difference?
More people will be in good-quality, secure jobs, which pay enough for healthy living; debt will be reduced; income inequalities will decrease.

People will be supported to make healthy lifestyle choices, in order to promote good health and prevent the development of illness.

Growth and regeneration will benefit all residents and improve their health and wellbeing.

Communities will be strong and resilient; participation in community life will be easier, and people will feel connected, involved and valued.

More people will live in a decent quality home with good open space nearby. Fewer people will be homeless.

What will we do?
Work with employers across the borough and other partners to improve access to apprenticeships, training, and good employment opportunities with appropriate wages. Work to ensure a good work–life balance. Improve routes into employment and skills in daily living for those with mental health needs or learning disabilities.

Work to prevent people developing long-term conditions, including through promoting NHS Health Checks, and increasingly work with the community to deliver prevention messages. Promote the web-based directory of health and social care services to enable self-assessments and referrals. Continue to provide smoking cessation, work to tackle alcohol and substance misuse, re-commission sexual and reproductive health services and implement a healthy weight strategy – all with a particular focus on engaging those groups most in need, and reducing inequalities in outcomes.

Ensure that Health Impact Assessments are completed for major building or regeneration developments. Work collaboratively to ensure that planning decisions have positive health impacts, including through limiting ‘unhealthy’ uses such as hot food takeaways and betting shops; and tackle issues such as underage sales, illicit tobacco and promoting healthy food, in partnership with enforcement. Promote ‘lifetime neighbourhoods’, and further develop town centres that are positive, healthy and welcoming areas for the whole community. Explore further opportunities for co-locating health services with places of employment, Children and Family Centres, or other places of benefit to the community.

Celebrate and protect diverse communities and different cultures, and identify and protect vulnerable residents, including those who are victims of violence. Reduce anti-social behaviour through working with the police, across the council, with local businesses and local residents. Ensure that everyone – including children and young people, older people, and vulnerable communities – feel safe in their communities. Promote volunteering and engagement activities, such as food growing and the use of libraries, across the borough.

Work with housing (including private landlords and registered social landlords) and others to increase the availability of affordable, healthy homes; and ensure that better use is made of existing housing. Integrate and increase the support available to residents living in care homes and supported or sheltered housing. Ensure that physical activity and other programmes in parks are being accessed by those most in need.

Work with the ‘Mini-Holland’ scheme and other partners to reduce air pollution and promote active travel, and ensure that sustainability is at the heart of local action. Work to ensure that transport services are accessible and successful in connecting communities and places.
Positive mental health and wellbeing will be promoted, and local services and their staff will be protected and supported. People will feel more confident to discuss and seek help for mental health problems.

Inequalities in health outcomes will decline, and the mental and physical health of vulnerable, excluded or disabled residents will improve. The needs of particular groups will be recognised and met.

Health and social care will be more integrated and have a greater focus on prevention.

Ensure that mental health services are high quality, tackle stigma, and increasingly shift resources from hospitals to the community sector. Promote positive mental health and wellbeing and support workplace initiatives such as Time to Change in local services to improve employee health and wellbeing. Work with local partners to attract more local residents to work in health and care services in the area, help people to stay well and manage their health better, and ensure parity of esteem between physical and mental health.

Ensure that all services are welcoming and working to engage those who are most in need, including through outreach work. Pay particular attention to the needs and experiences of disabled residents, including those with learning disabilities, and those with impaired vision. Ensure that we understand and meet the information needs of those accessing health or social care. Ensure that there is no discrimination in local services and the local community against people on the basis of ‘protected characteristics’ – which include age, disability, gender reassignment, race, sex, or sexual orientation.

Deliver the joint Better Care Together programme to improve the integration of care and prevention of ill health by, for example, implementing a social prescribing scheme, and support a range of other ‘early intervention and prevention’ programmes such as Local Area Coordination and Living Well Waltham Forest. These will harness support from volunteers and professionals to help people manage their conditions and make the most of local opportunities for help and to enrich their lives.

**Performance measures will include:**

<table>
<thead>
<tr>
<th>NHS Health Check uptake</th>
<th>Cancer screening and survival rates</th>
<th>Smoking quit rates – particularly in target groups</th>
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<tbody>
<tr>
<td>Levels of qualifications and skills</td>
<td>Unemployment rates, inequities in incomes and debt</td>
<td>Hospital admissions for alcohol and substance misuse</td>
</tr>
<tr>
<td>Self-reported wellbeing</td>
<td>Homelessness rates</td>
<td>IAPT access and referral for people with depression or anxiety</td>
</tr>
<tr>
<td>Violent crime and antisocial behaviour</td>
<td>Fuel poverty and pollution</td>
<td>Outcomes for care leavers</td>
</tr>
<tr>
<td>Outcomes for substance misuse clients</td>
<td>Incidence of TB</td>
<td>Cardiovascular diseases mortality rate</td>
</tr>
<tr>
<td>Complaints about noise</td>
<td>Proportion of homes which are affordable</td>
<td>Inequalities in outcomes by ‘protected characteristics’</td>
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OUTCOME 3. THRIVING MATUREY AND PROTECTED COMMUNITY: SAFE, SUPPORTED AND INDEPENDENT

2,055 people in Waltham Forest had dementia in 2013 (including those who are undiagnosed).

In a 2015 Residents’ Survey, one third of those aged over 65 reported that they had no access to the Internet.

4,956 years of life are lost on average per year in the borough as a result of causes that are ‘amenable’ to healthcare – representing deaths that should not occur in the presence of timely and effective healthcare (2014 data).
**Why is this important?**

Older age can and should be an opportunity for an active, independent and thriving time of life, and older people contribute hugely to our family support systems, culture and local economy. The older population also has particular health needs, which may include falls and dementia. The number of older people in Waltham Forest is expected to rise by 25% between 2011 and 2030, which creates increased pressure on services including the NHS, housing and adult social care. Increasingly, it is necessary to find solutions to run alongside existing support, in the community sector for example. The local health system – including primary, hospital and community care – is absolutely essential to health, and all local residents should be able to access excellent care.

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<tr>
<th>How will we know if we are making a difference?</th>
<th>What will we do?</th>
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<tbody>
<tr>
<td>Fewer older people will feel socially isolated, and more will be actively participating in community life.</td>
<td>Promote volunteering and other local activities for older people, support access to computers and the Internet and accompanying training, and promote wellbeing through cultural, artistic and learning opportunities. Ensure that community programmes and local free or low-cost activities are intergenerational and support older people’s access.</td>
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<tr>
<td>Older people will be independent and able to make decisions about the health and social care services they receive. More people will be able to have end-of-life care at home, rather than dying in hospital.</td>
<td>Work across health and social care to improve and increase patient involvement by increasing awareness of aids and assistive technology such as telecare; promoting the Expert Patient and Health Coaching Programmes – including in end-of-life care – in order to maintain respect, dignity and independence.</td>
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<tr>
<td>Fewer older people will experience falls, and those who do will be enabled to feel confident in independent living.</td>
<td>Ensure that homes are suitable for older people, and implement an early intervention and prevention falls programme in the community.</td>
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<tr>
<td>There will be more early prevention and detection, and coordinated care, of mental ill health in older age.</td>
<td>Promote dementia-friendly communities, and improve capacity for memory clinics to meet need. Ensure adequate care is available for those with dementia and their carers. Provide better detection and treatment or support for older adults with depression, and ensure that families are supported.</td>
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<tr>
<td>Individuals and communities will be protected during events that impact on their health and wellbeing, such as weather, climate change and health emergencies.</td>
<td>Work with local and national partners to put in place integrated health and social care case management and care coordination plans to protect the vulnerable and mitigate the impact of emergencies. Implement a local action plan on TB, improve vaccination rates and raise awareness of infectious disease in the community.</td>
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<tr>
<td>There will be excellent primary care with longer opening hours, in an atmosphere of respect, care and support.</td>
<td>Enable all patients to join their GP practice Patient Participation group, which will help to drive change and make improvements from the grass roots. Provide better support to carers, including older carers, including through work with the Carers’ Association. Excellent integrated primary care will be proactive, accessible, high quality and coordinated. This will be achieved by improving self-management, patient involvement, workforce development and the use of technology. Work with local pharmacies will take place to ensure that opportunities to deliver preventative public health messages, and provide effective and timely care, are maximised.</td>
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<tr>
<td>Local people will have access to a sustainable general hospital that delivers excellent care and shares its expertise with community health and social care services.</td>
<td>Implement a programme of work to ensure progress is made against the main areas of concern highlighted by the Care Quality Commission in relation to Whips Cross University Hospital. Work in partnership to deliver the ambitions of joint improvement and integration programmes in order to improve end-of-life and urgent care, deliver more care in community settings, improve mental health services, and build on the progress already made in integrated care.</td>
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More people will receive high quality community health services that enable care at home.

Patients will be enabled to use digital technology and other means to support self-care.

All those in need of care will be well, independent and resilient.

Adults who have long-term conditions or communicable diseases will be known to services, supported and taking action to manage their condition or mitigate harm.

Ensure sufficient provision of community-led and community-based care, such as health visitors and community matrons, which is responsive to the needs of individuals, families and carers.

Ensure that the Council’s Digital Programme, and other improvements in technology (including in the CCG), improve health for the population by allowing them to successfully access the right information and support at the right time.

Make use of the responsibilities and opportunities offered by the Care Act, in order to ensure integration, early intervention and prevention, the provision of advice, information and advocacy and a focus on wellbeing for the whole local population. Older people’s wellbeing and independence will increase as a result of access to good universal quality information, safer neighbourhoods, befriending and community activities.

Work with primary care and the local NHS to identify those who are not currently known to services as early as possible, and ensure that they are receiving appropriate and timely care. Support self-care and recognise the experience and expertise of patients and carers.

**Performance measures will include:**
- Admissions due to falls and fractures
- Hospital performance (e.g. waiting times)
- Carers included or consulted in decisions
- People dying in their preferred location
- Adults social care users’ social contact and safety and security
- Non-elective and emergency re-admissions to hospital
- Health status scores for older people
- Excess winter deaths
- Dementia diagnosis rate
- GP outcomes standard
- Vaccination rates and infectious disease spread
- Quality of life for older people

More people will receive high quality community health services that enable care at home.

Patients will be enabled to use digital technology and other means to support self-care.

All those in need of care will be well, independent and resilient.

Adults who have long-term conditions or communicable diseases will be known to services, supported and taking action to manage their condition or mitigate harm.
GLOSSARY OF TERMS

Assistive technology – Devices for people with disabilities that increase independence by improving the ability of people to perform tasks.

Better Care Fund (BCF) – A pooled NHS and local government budget, with the aim of integrating health and social care, reducing unnecessary and emergency hospital treatment, and protecting social care.

Better Care Together (BCT) – The local programme that governs health and social care integration in Waltham Forest through the BCF.

Care Act – A piece of national legislation that applies to adult social care in England, focusing on clearer, fairer care and support; wellbeing of the person needing care and their carer; prevention and delay of the need for care and support; and people in control of their care.

Care coordination – Deliberately organising patient care activities and sharing information with all those involved in order to achieve safer and more effective care.

Care Quality Commission (CQC) – The independent regulator of health and social care in England. The CQC monitors, inspects and regulates health and social care services.

Case management – Coordination of services on behalf of an individual person who is accessing different services such as health care, nursing, rehabilitation, social work, and so on.

Child and Adolescent Mental Health Service (CAMHS) – Specialist NHS children and young people’s mental health services.

Children and Family Centres – Locations for stay and play sessions, parenting support and information for those with children aged 0–5.

Children’s Health and Wellbeing Board – A local multi-agency board that reports to the Health and Wellbeing Board, and provides strategic direction and advice on issues concerning children and young people in Waltham Forest.

Clinical Commissioning Group (CCG) – NHS bodies responsible for the planning and commissioning of health services for the local area.

Communicable diseases – Diseases that spread from one person to another, such as Flu, Measles, Tuberculosis and Sexually Transmitted Diseases.

Community health services – Care that takes place primarily in people’s homes or in community locations. This can include teams of health visitors, nurses, therapists, and other health and social care professionals.

Continuity of care – Seamless delivery of health and social care through coordination and sharing of information between services.

CVD – Cardiovascular disease – a disease of the heart or blood vessels, including coronary heart disease, stroke, and heart failure.

Domestic offences – An offence of threatening behaviour, violence or abuse between adults who are or have been intimate partners or family members.

Early Help Service – A service that works with families who need additional support, in order to enable families to support their children to reach their full potential.
**Early intervention and prevention** – services, programmes or approaches that stop people becoming ill in the first place, and support people to achieve the best for themselves and their families.

**Excess winter deaths** – the additional deaths that occur over the winter period – often associated with cold weather, and predominantly occurring among older populations.

**Expert Patient Programme** – A programme that enables those living with a long-term condition, e.g. diabetes or CVD, to manage their own condition.

**Family Nurse Partnership** – A programme that provides specialist nurses to support vulnerable pregnant teenagers during pregnancy through to the baby’s second birthday.

**Free School Meal (FSM) status** – Those children who meet the criteria to receive a free school meal, which includes their parents being on low income or a range of benefits.

**GP Outcomes standards** – A set of indicators used to evaluate the performance of GP practices.

**Healthwatch** – Local independent ‘consumer champion’ for health and social care services, created to represent the views of patients and the public in the local area.

**Health and Wellbeing Board (HWB)** – A forum where leaders from the health and care system work together to improve the health and wellbeing of their local population and reduce health inequalities.

**Health Coaching Programme** – A method of patient education that guides and prompts a patient to be an active participant in behaviour change, by helping them to gain knowledge, skills, tools and confidence.

**Health emergency** – An event, either natural or manmade, that creates a health risk to the public – for example, a natural disaster or disease outbreak.

**Health Impact Assessment (HIA)** – A means of assessing the health impacts of a policy, plan or project.

**Healthy Child Programme** – The early intervention and prevention programme for improving the health and wellbeing of children, through health and development reviews, health promotion, parenting support, screening and immunisation programmes. Led by health visitors for children aged 0–5, and school nurses for school-age children.

**Healthy Schools London Programme** – An Awards Programme that works with schools to improve the health and wellbeing of children and young people.

**Health visitor** – A nurse or midwife who has had additional training and supports families with children under 5, offering advice and help to parents.

**IAPT** – The Improving Access to Psychological Therapies Programme, which supports the NHS in providing treatment and support for people suffering from depression and anxiety disorders.

**Illicit tobacco** – Tobacco and cigarettes that have been smuggled into the UK and are being sold illegally.
Key Stage 2 – The four years of schooling normally known as Years 3, 4, 5 and 6, when pupils are aged between 7 and 11. Key Stage 2 results are based on exams taken in Year 6.

Learning disability – A reduced intellectual ability or difficulty with everyday activities, which affects someone for their whole life.

Lifetime Neighbourhoods – Places designed to be inclusive regardless of age or disability. They include consideration of resident empowerment, access, services and amenities, built and natural environments, social networks and wellbeing, and housing.

Living Well Waltham Forest – A local pilot scheme to develop new pathways for vulnerable elderly people, which involves enhancing the role of the voluntary sector, with staff and volunteers conducting guided conversations with clients to help identify their needs/aspirations, and relaying this to health and social care professionals.

Local Area Coordination – A local pilot scheme to provide highly localised, personalised support to vulnerable people, building social connections and creating resilience.

Long-term conditions – Conditions that, at present cannot be permanently cured once someone has developed them but can be controlled by medication and other therapies. Examples include diabetes, heart disease, asthma and depression.

Memory clinic – A service run by health and social care professionals that provides specialist assessment for diagnosing, treating and supporting people with dementia.

Mini Holland – A set of local schemes, funded by Transport for London, to improve the borough’s infrastructure to increase the number of people walking and cycling.

NHS Health Checks – A free check available once every five years for all those aged 40–74 who do not already have a diagnosed heart condition, to assess the risk of heart disease, stroke, kidney disease and diabetes.

Non-elective admission – An unplanned, often urgent hospital admission (often via A&E).

Open space – Any open piece of land that is undeveloped (has no buildings on it) and is accessible to the public. This includes parks and other green space.

Parity of esteem – Valuing mental health equally with physical health.

Primary care – Health care given by a provider who is the first and principal point of continuing care for patients. Examples include GPs, dental practices, and community pharmacies.

Private landlord – Someone who owns and lets out one or more properties in order to produce income.

Protected characteristics – These include age, disability, gender reassignment, pregnancy and maternity, marriage and civil partnership, race, religion of belief, sex, and sexual orientation. The Equality Act 2010 made it unlawful to discriminate against people with a ‘protected characteristic’.
**Regeneration** – The process of reversing physical, economic and social decline – or promoting growth in these areas – through local interventions such as housing infrastructure.

**Registered social landlords** – Housing Associations – that is, private, non-profit-making organisations that provide low-cost ‘social housing’.

**Resilience** – The ability to adapt to, or ‘bounce back’ from, stress and adversity – such as family, relationship, or health problems.

**Safeguarding** – Actions taken to promote the welfare of children or vulnerable adults and protect them from harm – for example, to prevent abuse or exploitation.

**Self-care** – Individuals looking after themselves in a healthy way – including those who have a long-term condition being able to manage their own condition and keep as well as possible.

**Sheltered housing** – Schemes where residents over 50 years old can live securely in a community setting, and receive some extra support from the scheme manager.

**Smoking cessation** – Evidence-based programmes designed to help people to stop smoking.

**Social prescribing** – A way of linking patients in receipt of health and/or social care with sources of support within the community.

**Substance misuse** – A level of use of drugs or alcohol that is problematic to that individual and those around them.

**Supported housing** – A range of housing-related support services to enable vulnerable people to live independently in their own homes or other schemes.

**Telecare** – Services and technologies that enable older and physically less able people to remain living in their own homes – for example, personal alarms.

**Think Family approach** – Where staff from adult and children’s social care services work together, and in partnership with all members of the family, to ensure they receive the right support at the right time and in a joined-up way.

**Time to Change** – A national campaign formed by the charities MIND and Rethink Mental Illness that aims to end mental health-related stigma and discrimination.

**Transforming Services Together (TST)** – A programme to deliver a safe, sustainable and high quality health service for the London boroughs of Newham, Tower Hamlets and Waltham Forest – as defined by a plan developed by their CCGs.

**Troubled Families** – A national programme that has been implemented locally, which aims to support behaviour change among families who are involved with a specific range of issues, for example anti-social behaviour, long-term unemployment or child neglect.

**TB** – Tuberculosis, a serious infectious disease which primarily affects the lungs.
Accessing healthcare and protecting your health

Are you registered with a GP?
You can find a GP here: www.nhs.uk/Service-Search/GP/LocationSearch/4
There are instructions on how to register here: www.nhs.uk/chq/Pages/1095.aspx?CategoryID=68&SubCategoryID=158

Are you up to date with your vaccinations?
If you are over 65, you can get a vaccination against pneumococcal infections (pneumonia). If you are 70, you can get a shingles vaccination. There is more information here: www.nhs.uk/conditions/vaccinations/pages/vaccination-schedule-age-checklist.aspx

Are your children up to date with their vaccinations/immunisations?
You can check what vaccinations they should have had here: www.nhs.uk/conditions/vaccinations/pages/childhood-vaccination-schedule.aspx
If you are unsure, ask your GP.

Have you had your flu jab?
You can have the free flu jab at many local pharmacies, as well as your GP.
www.nhs.uk/Conditions/vaccinations/Pages/who-should-have-flu-vaccine.aspx
It is free for people who:
- are 65 years of age or over
- have certain medical conditions such as asthma, diabetes, kidney problems
- are living in a long-stay residential care home or other long-stay care facility
- are a carer
- are a healthcare worker with direct patient contact or a social care worker
- school children in years 1 and 2 (they will receive the vaccination at school)

Have you had your five-yearly NHS Health Check at your GP?
This is for everyone people aged 40–74, who have not already been diagnosed with certain long-term conditions. The health check helps prevent heart disease, stroke, kidney disease, and certain types of dementia. See www.nhs.uk/Conditions/nhs-health-check/Pages/NHS-Health-Check.aspx
Do you have a long-term condition (e.g. diabetes, high blood pressure)?
You can find out more about what support is available, and how you can take control of your condition:
www.nhs.uk/planners/yourhealth/Pages/Yourhealth.aspx
If you have diabetes, have you been for your annual diabetic eye screen? This is different to the eye tests you have at the optician, and is important to help detect changes to your eyes caused by diabetes which can lead to vision loss. See www.gov.uk/government/publications/diabetic-eye-screening-description-in-brief

Are you up to date with your cancer screening?
www.walthamforest.gov.uk/Pages/Services/cancer-awareness.aspx
Cervical screening: Women aged 25–64, every 3–5 years (at GP)
Breast screening: Women 50–70 years, every 3 years (at GP)
Bowel screening: Men and women 60–74, every 2 years (will be contacted by post)

Are you aware of what the local NHS offers residents?
www.walthamforestccg.nhs.uk/

Have you had a dental check this year?
If not, contact your dentist or if you need to find one, visit www.nhs.uk and use the postcode checker for dental services close to you.

For reliable online health advice on a huge range of topics, go to www.nhs.uk/Conditions/Pages/hub.aspx

Other advice and information

Are you aware of other support available through the council?

Are you aware of local community groups that might interest you?
www.voluntaryaction.net/

Do you know that there are many activities taking place in libraries, parks and other locations?
www.walthamforest.gov.uk/enjoylife
Would you like to access a ‘books on prescription’ service?
This can help you to understand and manage your health and wellbeing using self-help reading. See http://reading-well.org.uk/

Are you worried about housing, debt or employment?
The location Citizen’s Advice Bureau may be able to help you with these issues. See https://citizensadvice.citizensadvice.org.uk/walthamforestcab.htm

Would you like to share your experiences of health and social care services?
Healthwatch Waltham Forest gathers information and feedback from local people about their experiences of services. More information is available at www.healthwatchwalthamforest.co.uk/get-involved, or you can call 020 3078 9990.

Keeping healthy

Do you smoke?
If so, would you be interested in free support to help you quit? This is available here: www.walthamforest.gov.uk/pages/services/ph-stop-smoking.aspx

Do you or any of your family want to lose weight, increase your physical activity or eat more healthily?
Children: www.walthamforest.gov.uk/Pages/Services/ph-healthy-weight-children.aspx
Adults: www.walthamforest.gov.uk/Pages/Services/ph-healthy-weight.aspx
There are free exercise classes offered in parks across Waltham Forest: www.ourparks.org.uk/borough/waltham-forest
Details of Waltham Forest’s leisure centres are available here: www.better.org.uk/areas/waltham-forest

Would you like information or support on what to do if you are feeling anxious or down?
If you are feeling anxious or down (or are worried about someone who is), you can talk to your doctor or call 0300 555 1271 for information about free services to support you. If you need help immediately, you can call the local Mental Health Direct helpline on 0300 555 1000 any time, day or night. More information is also available at:
IAPT: http://walthamforestcarers.com/index_sfc.php?page=35&s1=59&s2=229&s3=345
Mind: www.mind.org.uk/information-support/a-z-mental-health/
Samaritans Waltham Forest: www.samaritans.org/branches/samaritans-waltham-forest

Do you need contraception or sexual health advice?


**Have you ever been concerned about the amount of alcohol you drink?**
Find out more at: [www.nhs.uk/Livewell/alcohol/Pages/Alcoholhome.aspx](www.nhs.uk/Livewell/alcohol/Pages/Alcoholhome.aspx)

**Have you ever thought about changing the way you use drugs or alcohol?**
Contact Lifeline: [https://www.lifelinewalthamforest.org.uk/](https://www.lifelinewalthamforest.org.uk/)

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**Family and children’s support and information**

**Do you have a child under 5?**
The CCG has launched a self-help booklet, app and website for parents which includes a guide to services and how to manage common illnesses and promote health and wellbeing for children from birth to five years. Download the booklet at [www.walthamforestccg.nhs.uk/childhealthguide](http://www.walthamforestccg.nhs.uk/childhealthguide) or search ‘childhealthguidewf’ on any Apple or Android device to get the app.

If you have young children, you may be eligible for Free Early Education to help your child start to socialise with other children and prepare for schools. If you have a 2-year-old, check your eligibility here: [www.walthamforest.gov.uk/Pages/Services/education-early-years-grant.aspx?l1=100014&l2=200016](http://www.walthamforest.gov.uk/Pages/Services/education-early-years-grant.aspx?l1=100014&l2=200016)

If you have a 3- or 4-year-old, check your eligibility here: [www.walthamforest.gov.uk/Pages/Services/feee-pre-school.aspx?l1=100014&l2=200016](http://www.walthamforest.gov.uk/Pages/Services/feee-pre-school.aspx?l1=100014&l2=200016)

If you are a parent and would like to undertake a high quality parenting course in Waltham Forest, there are many options. For more information, phone 020 8496 3000 or email WFFIS@walthamforest.gov.uk

**Are you interested in Children and Family Centres?**
If you have young children, check out one of your local Children and Family Centres – see [www.walthamforest.gov.uk/pages/services/families-family-centres.aspx](http://www.walthamforest.gov.uk/pages/services/families-family-centres.aspx).

They run a range of educational and fun stay and play sessions for children and also support parents by connecting them with a range of other health and local support services – like housing and employment, parenting classes, breastfeeding cafes and drop-in sessions with professionals such as speech and language therapists.

**Would you like to find out about free vitamins for you and your baby?**

If you are pregnant or have children under five years, you will be eligible for some free Healthy Start Vitamins to keep you healthy. You may also qualify for the Healthy Start scheme which will provide you with regular vouchers for milk and vegetables too. Just ask your health visitor or midwife. For more information on the national scheme, call the helpline on 0845 607 6823 or visit [www.healthystart.nhs.uk](http://www.healthystart.nhs.uk).

**Would you like to know more about the Healthy Schools London Programme?**

More information, and other helpful resources, are available on their website: [www.healthyschoolslondon.org.uk](http://www.healthyschoolslondon.org.uk)

**Are you worried about your or your child’s health?**

To speak to someone about **non-urgent** health concerns, call your GP or if your concern is related to a pregnancy, call your midwife. If your concern is regarding a pre-school child or baby, call your health visitor or go to one of the drop-in clinics. Call your closest clinic for updated times and locations:

- Chingford Health Visitors Silverthorn Medical Centre **020 8430 7222**
- Chingford Health Centre **020 8430 8052**
- Comely Bank Clinic **020 8430 7141**
- Forest Road Medical Centre **020 8430 8103**
- Langthorne Health Centre **020 8430 7510**
- Leyton Green Clinic **020 8430 8130**
- Green Man Medical Centre **020 8430 7360**