Chair’s Foreword, 2017-18

Councillor Naheed Asghar

As the new Board Chair – and Cabinet Member for Health and Voluntary Sector Partnerships – it has been satisfying to see the ongoing, positive implementation of our five year Health and Wellbeing Strategy (2016-2020). I am pleased that during 2017-18 we have further improved how the Board works by developing our key ‘scorecard’ indicators to enable the Board to identify and take action on critical health and wellbeing issues. Following a strategic needs assessment the Board has also been focused on innovation, good practice and change in four priority areas – alcohol and drugs, mental wellbeing, end of life care and children’s healthy weight – working closely with the borough’s other strategic boards.

In a time of significant and continued changes within health and local government services, the need for the Health and Wellbeing Board to understand and push for ambitious improvements in the health and wellbeing of Waltham Forest’s diverse communities becomes ever more pronounced. The Board continues to work hard, meeting these challenges head on as a partnership, through critical conversations, research, policy development and partnership action.

I am ambitious for the Board. Over the coming year I will work to ensure that local health and wellbeing needs are prioritised. I also expect to see further improvements in identified indicators. I look forward to building on the good relationships and constructive challenge that is already taking place between partners at Board meetings to deliver real improvements in the health and wellbeing of our borough’s residents. In line with this vision, we will also undertake a programme of Board development work in 2018-19. This will ensure that as a partnership we are providing the right leadership, working together to an innovative, shared vision and have the tools we need to oversee action on crucial health and wellbeing issues.
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1 About the Waltham Forest Health and Wellbeing Board

1.1 Who we are

Health and Wellbeing Boards were established as part of the Health and Social Care Act in 2012 to act as a forum in which key leaders from the local health and care system could work together to improve the health and wellbeing of their local population. Meeting in public, the health and wellbeing board is a formal committee of the local authority charged with promoting greater integration and partnership between bodies from the NHS, public health and local government.

The Waltham Forest Health and Wellbeing Board (HWB) – chaired throughout 2017-18 by Councillor Naheed Asghar – is a partnership of statutory and non-statutory organisations, representing those that plan and provide health services and the people who use those services across the Borough.

The Health and Social Care Act 2012 sets out the following specific functions of the Health and Wellbeing Board:

- To assess the needs of the population through the Joint Strategic Needs Assessment (JSNA)
- To agree and produce a Health and Wellbeing Strategy to address needs, which commissioners will have to take into account in developing commissioning plans for health care, social care and public health
- To promote joint commissioning
- To promote integrated provision, joining up social care, public health and NHS services with wider local authority services
- Involvement in the development of Clinical Commissioning Group (CCG) commissioning plans
- To provide advice to the NHS Commissioning Board in authorising and assuring CCGs
- To give the local authority its opinion on whether or not the Council is discharging its duties to have a JSNA and any Joint Health and Wellbeing Strategies.

This annual report provides details of the work done in 2017-18 by the Board and its three sub committees – Better Care Together, Children’s Health and Wellbeing and Joint Commissioning – to bring our principles into practice (see p. 6), exploring achievements, work still to be done and challenges faced in improving health and reducing health inequalities for Waltham Forest residents.
1.2 Purpose of this report
This annual report provides details of our Strategic Priority Action Plans for 2017-2019 as of 31 March 2018. It illustrates how effective the Health and Wellbeing Board has been over the 2017/18 period, outlines how its partners have contributed to the work of the Board on key health and wellbeing issues for Waltham Forest residents and provides details of learning from audits.

In writing this report, contributions were sought directly from board members, chairs of priority groups and other relevant partnerships. The report also draws heavily on numerous reports presented to the Board and its sub-groups during the year.

1.3 Strategic Partnership Unit and our strategic links
In early 2016 the Strategic Partnership Unit was set up to provide joined up support across the four strategic boards; Waltham Forest Safeguarding Adults Board, SafetyNet, Health and Wellbeing Board and Waltham Forest Safeguarding Children Board. The unit provides policy support and strategic planning to all the boards and identifies opportunities to undertake cross-cutting work across more than one board with the aim of reducing duplication and increasing effectiveness and efficiency to improve outcomes for residents.

Examples of cross cutting work include the Learning and Improving Practice Forum which oversees multi-agency audit activity, multi-agency training and disseminating of learning from local learning reviews and statutory reviews. We also have the One Panel that ensures we have a Think Family approach to our review work that enhances our learning.

This way of working is still relatively unique both across London and nationally and we have continued to develop our approach to ensure we are maximising the opportunities it provides. Early evidence of impact includes improvements in the functioning of the boards, alongside the appropriateness of the reports through the use of challenge questions for authors. There has been a reduction in duplication and it is now much
easier to agree where a piece of work should sit when of interest to more than one board. The joined up needs assessment and priority refresh added value and understanding to the boards. The One Panel has continued to grow and is now a mature partnership which is able to make complex decisions and be clear about being proportionate and focused when commissioning reviews.

1.4 Waltham Forest Statutory Board structures and agreed priorities

As part of our Think Family approach to working, an in-depth joined up strategic needs assessment was completed in February 2017 across the four boards. This comprised of a multi-agency event where members discussed and agreed the priorities that needed to be addressed to improve outcomes for residents in the borough. The priorities were then allocated to the most appropriate board and cross cutting themes identified across all the boards.

Four strategic priority areas to the Health and Wellbeing Board’s work – two that cut across all strategic boards (alcohol and drugs and mental wellbeing) and two specific to the Board (end of life care and children’s healthy weight). The Board oversees these partnership task and finish groups, whose focus is on identifying gaps in service, innovation and developing action plans to bring about change.

The four board chairs and members were confident that this assessment was so comprehensive that these priorities would be relevant going through to 2018/19, however it was acknowledged that regular sense checking and reviewing of the actions plans against the national landscape is important to identify any emerging trends and to ensure we are not omitting an area of work from our priorities that has come into focus since the needs assessment was completed.

A review of the Health and Wellbeing Board priorities took place in January 2018 and there was a consensus for their continuation. The diagrams (below and next page) highlight our priorities and the structures to deliver them across the four Strategic Boards and specifically within the Health and Wellbeing Board.
Priorities for the four Strategic Partnership Boards 2017-19

Supporting agencies to work together to improve outcomes in safety, safeguarding and wellbeing for residents in Waltham Forest

Members:
Bar’s Health NHS Trust, CAFCASS, Care Quality Commission, Colleges and Schools, Community Rehabilitation Company, Community Waltham Forest, Healthwatch, Independent Care Providers, Lay Members, London Ambulance Service, London Fire Brigade, Metropolitan Police Service, National Probation Service, NELFT, Voluntary and Community Sector Organisations, Waltham Forest Council, Waltham Forest NHS Clinical Commissioning Group

SafetyNet
Reduce anti-social behaviour, gang crime, violence against women and girls, youth offending, and substance misuse

Safeguarding Children Board
Partners work together for the safety and well being of children and young people

Safeguarding Adults Board
To protect people who need help and support

Health and Wellbeing Board
To deliver health services in the borough, improve people’s health and reduce health inequalities

Prevent

Anti-Social Behaviour

Gangs and Youth Violence

Neglect

Safeguarding in Settings

Pressure care

Making Safeguarding Personal

Quality & Standards

Self Neglect

Healthy Weight for Children

End of Life Care

Cross Cutting Priorities

Violence against Women and Girls (VAWG)

Adolescents Safeguarding including child sexual exploitation, children missing, harmful sexual behaviour, gangs etc.

Modern Slavery

Cuckooing

Drugs and Alcohol

Mental Wellbeing

We ensure residents influence the work of the boards in different ways. We share learning with practitioners to improve practice.

www.walthamforest.gov.uk/strategicpartnerships
1.5 Our key principles

<table>
<thead>
<tr>
<th>Principle</th>
<th>Description</th>
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<tbody>
<tr>
<td>Working with the community</td>
<td>We will continue to listen and work with local people to make the best use of their strengths, to support community groups, and to take actions based on what we hear from them.</td>
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<tr>
<td>Integrating health and social care</td>
<td>We are bringing together our social care and health systems to work in a seamless way that will ensure people get personalised and coordinated support.</td>
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<tr>
<td>Prevention and early intervention</td>
<td>Our ambition is to expand and further integrate our early intervention and prevention efforts to keep people healthy and support people to achieve the best for themselves and their families.</td>
</tr>
<tr>
<td>Reducing inequalities and tackling wider determinants of health</td>
<td>We will continue to integrate our services to improve the conditions and surroundings in which people are born, grow, live, work and age.</td>
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<tr>
<td>Accountability and scrutiny</td>
<td>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 scrutinised by H&amp;W using performance indicators.</td>
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<tr>
<td>Parity of esteem between mental and physical health</td>
<td>The HWB is committed to providing equal support for both physical and mental health across the borough.</td>
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1.6 Governance

The Health and Wellbeing Board met every three months – quarterly – during 2017/18. The Board’s Business Management Group (BMG) – consisting of the Chairs of the Board’s three Sub Committees and the CCG’s Chief Officer as Chair – takes responsibility for setting the Board’s agenda and reviewing performance. The BMG meets prior to every Board meeting to decide what issues, discussions and strategies come for consideration by the Board. 2017-18 has been the first year that the BMG-agreed ‘Scorecard’ – a range of health-related data from the borough and across London and the country – has been used to support Board decision-making and to measure the impact of its Health and Wellbeing Strategy 2016-2020 in place.

1.7 Residents’ voice

To ensure that there is good quality engagement with Waltham Forest’s diverse communities Healthwatch runs a Health and Wellbeing Forum two weeks before the Board meets. Up to 40 residents and voluntary organisations attend these meetings, focused on creating critical, positive feedback for the Board on up to three reports, with the authors invited to present. The Healthwatch manager, in her role as Board member, is then able to represent the community’s feedback at the Board meeting.
Our Strategy 2016-2020

The five-year Health and Wellbeing Strategy 2016-2020 has set out an exciting, comprehensive vision of how we planning and delivering health services in the Waltham Forest. This strategy aims to improve people’s health and reduce health inequalities. To do this, the strategy focuses on:

- The best start in life: develop, thrive and achieve
- Healthy, longer, happy lives: prosperous, active and sustainable
- Thriving maturity and protected community: safe, supported and independent

The strategy has been produced by the council’s public health department and Waltham Forest CCG in partnership with the wider council and local residents.

To see the video of our residents and communities talking about the Health and Wellbeing strategy as well as celebrating our borough, please click here (or go here http://bit.ly/2f5NQ6U)
3  What we have achieved

3.1 Health and Wellbeing Board
A wide range of relevant issues and strategies have been discussed at the quarterly Health and Wellbeing Board meetings and these are listed below, with the impact of the discussions noted next to it:

21 June 2017
- Special Educational Needs and Disabilities (SEND) CQC Action Plan: senior Board members to approve the final version of the Statement of Action with an update to come back to the Board.
- Strategic Priorities: agreed setting up of cross-cutting and Board-specific priorities (alcohol & drugs, mental wellbeing, end of life care and children’s healthy weight)
- Creating a Sustainable Voluntary Sector: after discussion a working group set up with senior council leaders as well as Healthwatch and Community Waltham Forest to take action.
- East London Partnership Board update: discussion about impact of change.
- Pharmaceutical Needs Assessment (PNA): fed into plans for revised PNA.

2 October 2017
- Community Statement on East London Health & Care Partnership (ELHCP) and North East London Sustainability and Transformation Plan (NEL STP): Save Our NHS with Board response: critical debate with presentation and Q&A with Save Our NHS; report to a future meeting on patient participation groups and bed numbers.
- Annual Report: feedback on the draft and decision for a One Public Estate work report to go to the Board Business Management Group (BMG) then the Board.

6 December 2017
- Substance Misuse Strategy: the Board fed back and approved the strategy.
- Mental Wellbeing Strategy: endorsed the approach, including engagement, and the development of an action plan to implement its aims.
- SEND update: Board thanked officers for progress and suggested work prior to the March 2018 meeting with CQC.
- PNA: members noted that there is an adequate service level and spread.
- Patient Practice Groups briefing: Board support for report recommendations.

11 April 2018
- Hospital Beds as a Resource – Systematic Processes and Challenges: a further report back on progress requested on the improved use and availability of beds and alternatives to hospital and residential care.
• Whipps Cross Redevelopment Update: endorsement of vision with push for this to be supported by national government as well as local communities. Request that integrated health and social care provision becomes integral to the vision.
• JSNA: agreed refresh and priorities.
• PNA: agreed to publish in line with statutory duty and to refresh annually with a drive for more consistent, high quality pharmacies to provide health care services and help tackle health inequalities.
• Healthcare delivery and GP provision in Waltham Forest: recognition of the need for a partnership approach to ensure that residents receive local, high quality GP services, especially where there are new housing developments.

3.2 Board priorities

After the council-wide Strategic Needs Assessment, the Board oversees the work of four priority task and finish groups and their 2017-18 work is evaluated below:

• Drugs and Alcohol (cross-Board priority)
• Mental Health (cross-Board priority)
• Children’s Healthy Weight (Board-specific priority)
• End of Life Care (Board-specific priority)

HWB cross-cutting priority: Alcohol and Drugs
• The substance misuse strategy and needs assessment have taken place, driven by the Alcohol & Drugs Steering Group and influenced by feedback from the Health and Wellbeing Board. Multi-agency partners noted gaps and supported cross-cutting sections in the needs assessment and strategy focused on children’s social care and young people, adult social care and police and probation work on drugs.
• Learning from Safeguarding Adults Reviews on self-neglect in care homes has been implemented
• A multi-agency audit has taken place (see 4.1)
• It has been recognised that more analysis needs to be done to explore a lower number of referrals into commissioned services and the pathways that need to be developed.

This area’s action plan focused on some key target groups:
• Reducing drug and alcohol associated disruption in families, including prevention of future substance misuse as young people transition to adulthood
• Improved outcomes for adults with problematic substance use issues in addition to other complex needs
• Reduce the number of residents experiencing alcohol or drug-related exploitation
• Improve outcomes for couples who live with a combination of substance misuse, domestic violence and complex health or social needs.

HWB cross-cutting priority: Mental Wellbeing
Work on this priority began work in late 2017, with a multi-agency brainstorming meeting to explore the challenges, good practice approaches as well as the key partners that could come together to make the most difference to residents’ lives. Key issues raised at this meeting, that were seen as most impacting on mental wellbeing, included social isolation, the impact of housing (especially being in temporary accommodation out of borough, losing support networks or being street homeless) and the high levels of unmet need, set against the positive potential of volunteering opportunities and befriending schemes.

Work to develop a mental wellbeing strategy with the support of this new task and finish group has then informed an action plan, prioritising these areas of work ready for 2018/19:
• Promote mental wellbeing with the communications, digital and culture teams
• Address wider determinants of mental wellbeing, including housing and poverty
• Early intervention for those struggling with their mental health, including training for frontline staff, collating referral services details and raising awareness and use of London Digital Mental Wellbeing Service – Good Thinking
• Promote mental wellbeing in schools; support vulnerable children/young people

Board-specific priority: End of Life Care
In light of a number of strategic and operational groups starting work on End of Life Care within and across health partners, this task and finish group had to redefine its
purpose to ensure that it was adding value and not duplicating work. Initial work included updating the online directory with end of life care contacts, starting to scope changes to contracts, exploring good practice and exploring what training frontline professionals need with reference to the Government’s Ambitions for Palliative and End of Life Care Framework 2015-2020 document. The group also integrated findings into their action plan from a Safeguarding Adults Review.

Board-specific priority: Children’s Healthy Weight
This priority developed out from the borough’s Healthy Weight Strategy 2015-2020 and has been refined to focus on delivering work – whether this is policy, process or projects – that allows children to make healthy food choices, stay physically active and maintain a healthy weight going forward in their lives.

Highlights from the 2017-18 Children’s Healthy Weight action plan include:
• Reviewing the Healthy Weight Strategy 2015-2020 focused on 0-4 year olds, based on the gaps and actions identified. For example, work on achieving the UNICEF Baby Friendly Accreditation started; healthy eating training was delivered to frontline staff and a scheme opened to increase outdoor street play.
• The review for 5-17 year olds included a letter being developed for GPs to support them in challenging conversation with under- and overweight children; Waltham Forest caterers achieved gold standard in primary school catering and silver in secondary schools and 13 schools in the borough are taking part in food for life programme, growing food.

Other Board cross-cutting priorities

Violence against Women and Girls (VAWG) – sits with SafetyNet
The VAWG group has been responding to user need and service gaps. For example, VAWG provision was expanded through the London Crime Prevention Fund and Operation Encompass allows police to inform schools that a child has been affected by domestic abuse the previous day/night. The MARAC review is implementing a change in approach to reduce repeat incidents of domestic abuse and a directory of services for victims/survivors has been produced to increase awareness of support available. Demand for all VAWG services has increased which reflects the group’s ambition of increasing survivors’ confidence in reporting VAWG and seeking support.

Modern slavery – sits with Safeguarding Adults Board
This group has been focusing on raising awareness of what modern slavery is with residents and organisations whilst delivering a coordinated programme to support frontline practitioners across Waltham Forest. As part of this work a multi-agency
workshop of local partners and external specialists from modern slavery organisations was held in January 2018 to develop a local pathway for adult and child victims of modern slavery.

Adolescents Safeguarding – sits with Waltham Forest Safeguarding Children’s Board
This priority group has focused on improving knowledge about children experiencing or at risk of child sexual exploitation (CSE) and who go missing to supporting improved agency responses. This has included the production of a short film to raise awareness with parents, carers and practitioners of children going missing and the views of children and young people have been actively surveyed. NELFT has created a safeguarding adolescents training package while Public Health have begun a three-year Home Office funded violence against women and girls ‘whole school approach’ project, which is already showing clear changes in young people’s attitudes.

3.3 Board Sub Committee work

Better Care Together
The Better Care Together Sub Committee is responsible for a programme of 25 schemes on behalf of the Health and Wellbeing Board, in order to deliver the aims set out in the Care Act, Five Year Forward View and Health and Wellbeing Strategy. The programme is an ambitious initiative that is working to brings together integrated care and support plans for residents with core partners including the CCG, local authority, NELFT, Barts Health and the community and voluntary sector. The programme is divided into 3 different areas of work:

- Communities (with a focus on prevention and optimising community care following a crisis or admission to hospital)
- Urgent & Emergency Care
- End of Life Care
- Strategic enablers

One of the main focuses of work in 2017-18 has been to develop a Managed Network of Care to respond to the present system in which care and support are delivered in organisational silos. The aim is to improve the connections between services so that transfers of care are managed in a ‘seamless’ way from a residents perspective. An overview of the model is on the next page with a case study, showing a detailed example of how a local resident has benefitted from this new way of working.
CASE STUDY: Local Area Coordination

After a stay in hospital recovering from a leg fracture 84-year-old Jim (name changed to protect identity) wanted to return to his own home, in the community he had always lived. But over the years, Jim had become isolated in his home and had been struggling to look after the property. Both the interior and garden had deteriorated to such an extent that both posed a risk to Jim. He was also embroiled in arguments and disputes with his neighbours because of the condition of the garden. It looked as though Jim was heading for respite care leading to early entry to long term care.

However, through the Local Area Co-ordination scheme, Community Action cleared Jim’s garden and worked with him to set up an arrangement where the garden could be maintained together, through a ‘garden share’ scheme. Jim was also supported to help rebuild his relationships with his neighbour and reconnect with his family. The team also negotiated with the Environmental Health Team on Jim’s behalf and the Healthy Housing Hub to ensure that Jim’s heating was put on, keeping him warm and comfortable in his own home.
Children’s Health and Wellbeing Sub Committee
This Sub Committee takes responsibility for issues that specifically affect babies, children and young people up to the age of 18 on behalf of the Board, with any issues that need the authority of the Board escalated for action.

Key issues focused on by the Sub Committee during 2017-18 include:
- Healthy Childhood Weight (working with the Task & Finish Group)
- Special Educational Needs and Disabilities (SEND) improvement work
- Maternity & Early Years and Healthy Schools (task and finish groups)
- Immunisations
- Child and Adolescent Mental Health Services (CAMHS)
- Use of urgent care by children within Barts NHS Trust

An important area of progress in 2017-18 has been information sharing. As part of the new birth visit from health visitors it has been agreed that if the parents give consent they will be registered with their local children’s centre. The centre then gets in contacts with details of the services they offer. This agreement has increased the reach of the children’s centre model and increased the publicity about the wide range of services that they offer. This process was a challenging one because of partner concerns about General Data Protection Regulation (GDPR), however, consistent oversight from the Children’s Health and Wellbeing Sub Committee allowed this process to be created and embedded.
4 Learning and improving practice

4.1 Multi-agency audits
As part of the Strategic Partnerships’ work regular multi-agency audits take place to review practice and seek improvements based on real life cases. Everyone who has worked with an individual or family – such as health, adult social care, education and the police – are involved, led by a professional who was not directly involved. Where possible a Think Family approach is used, meaning that when we’re working with one individual in a family, we also consider everyone else in that family and what their needs are. During 2017-18 two Think Family multi-agency audits took place on behalf of all four of the borough’s statutory boards. The audits supported the work of the groups for cross-cutting priorities for Drugs and Alcohol and for Mental Wellbeing ensuring boards understood front-line practice. The audits highlighted area of good practice and areas for improvements.

Alcohol and drugs
This audit report identified a number of findings, including:
- Not all risk assessments included other key family members within the household: in some cases this led to risks being identified at later in the service user’s journey.
- The needs of people presenting with both drug/alcohol and mental health issues were often not met due to the criteria for accessing adult mental health services.
- Practitioners need to further increase their knowledge of specialist support for people with learning difficulties so they can access appropriate services.
- A cohort of service users with high vulnerability and complex needs could benefit from a coherent joined up multi-agency approach.

Mental wellbeing
The recommendations for this audit report included:
- More signposting to self-help and online resources for people who do not meet the threshold criteria for support
- Ensure section 135 use to gain access to properties of people with chaotic lifestyles
- Develop partnerships with the community, voluntary and faith sectors
- Explore creative solutions for people with mental health needs who have chaotic lifestyles and who are not engaging or eligible for statutory services.

Bitesize video guides
Our bitesize guides are short films that allow us to share key messages from reviews and multi-agency audits with a wide range of professionals. In 2017/18 we produced bitesize guides on alcohol and mental wellbeing. We also produced a further three bitesize guides on self-neglect, a revised guide to thresholds and practice for working with children and families in Waltham Forest as well as a virtual induction to the work of the borough’s four strategic boards. Click here or on the image to view the bitesize guides on our Learning & Improving Practice webpage.
**E-bulletin**

In 2017-18 we distributed four e-bulletins to over 1000 practitioners in the borough containing key messages from the four strategic boards, learning from reviews and audits as well as training event details. The e-bulletins seek to raise the profile of the boards and disseminate our key messages. Their frequency will increase in 2018/19.
What next for the Health and Wellbeing Board?

The Board faces a number of key challenges, including how it can influence integrated commissioning decision, a need to review the indicators used to monitor the Board’s work and to facilitate constructive partnership discussions and commitment to action at Board meetings. Responses to these challenges are partly explored overleaf in a draft Forward Plan for 2018-19 and Board-selected Scorecard data for measuring the effectiveness of the Health and Wellbeing Board and its Strategy.

In terms of our priorities we have already started to identify key deep dive conversations for Board partnership response during 2018-19 (housing and health and air quality) alongside some key strategies, including substance misuse and mental wellbeing, which will underpin these cross-cutting Board priority areas.

Alcohol & Drugs
- The Council’s digital offer will be improved to support prevention, early intervention and referral information for residents
- School pupils to receive accurate, current alcohol and drug education, including risks
- Support for professionals to identify and respond appropriately to alcohol and drug issues in their work with residents, including those with dementia
- Create a new pathway for people with dual diagnosis (mental illness and problematic substance misuse) to ensure seamless service
- Work to ensure that residents are safe from anti-social behaviour and drug related criminality in their neighbourhoods and homes.

Mental Wellbeing
- Promote mental wellbeing working with communications, digital and culture teams
- Address wider determinants of mental wellbeing, including housing, poverty and work
- Early intervention for those struggling with their mental health, including training for frontline staff, collating referral services details and raising awareness and use of London Digital Mental Wellbeing Service – Good Thinking
- Promote mental wellbeing in schools and support vulnerable children and young people

End of Life Care
- Explore a local needs assessment to better understand End of Life Care needs
- Revise health and social contracts to incentivise improved outcomes
- Ensure training, information sharing and advice allow for a more effective whole system approach, from early intervention to post death

Children’s Healthy Weight
- Map food outlets with 400m of schools or youth centres and prioritise them to sign up to Healthier Catering Commitment (HCC)
- Develop second cohort of Feel Good Ambassadors for schools, promoting healthy lifestyles through diet and physical activity
- Develop local food poverty action plans
Progress with joint commissioning and service planning
From May 2018 the Integrated Strategic Commissioning Joint Management Team will push forward the agenda for health and social care services to be commissioned together by the local authority and clinical commissioning group (CCG). There will be three provider-led integrated care sub-systems planning out these changes focused on Communities, Integrated Urgent and Emergency Care and End of Life Integrated Care System.

A major focus for the Better Care Together Sub Committee in 2018-19 will be the development of the Managed Network of Care and Support. This Network aims to coordinate the complex network of support services to align with the range of health and social care needs that individuals have over time within the community.

Next steps to for children and young people’s health and wellbeing
The dedicated Children’s Health and Wellbeing Sub Committee will continue its work overseeing the Maternity & Early Years & Healthy Schools Task & Finish Groups. In-depth discussions are already planned on the Think Family approach, CAMHS, SEND, immunisation and breastfeeding, with the focus on effective partnership action.

Striving for continuous improvement
In 2018-19, development work will take place to support the Board to review its role, function and effectiveness. Following a competitive bidding process with other London boroughs in September 2017, Waltham Forest was awarded a small amount of funding, through the London Health and Wellbeing Board System Improvement Programme. A key goal will be to ensure that the Board continues to create, influence and manage decisions, projects and policies that deliver positive change, in terms of the health and wellbeing of Waltham Forest residents.

The key components of the development programme will be:
• An independent observation of the Board with feedback to Board members
• A survey of Health and Wellbeing Board members, exploring the purpose, commissioning role and content of meetings
• An externally run focus group with key partners about past, present and future engagement with the Board

In late 2018 a report will then be produced containing analysis, good practice and recommendations for change to be considered and implemented by the Board.

We know the importance of further strengthening our strategic work and engagement with the community, voluntary and faith sector and this will also continue across all our work and priorities into next year.
### Appendix 1: Attendance at the Health and Wellbeing Board

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<thead>
<tr>
<th>Partner Agency/Member</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
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<tbody>
<tr>
<td>LBWF, Councillor 1 (Chair)</td>
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<tr>
<td>LBWF, Councillor 2 (Adult Services)</td>
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<tr>
<td>WFCCG, Representative 1 (Co-Chair)</td>
<td></td>
<td></td>
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<td>50</td>
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<tr>
<td>WFCCG, Representative 2 (Chief Officer)</td>
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<tr>
<td>WFCCG, Representative 3 (Clinical Lead)</td>
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<td></td>
<td>50</td>
</tr>
<tr>
<td>WFCCG, Representative 4 (Clinical Lead)</td>
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<tr>
<td>NHS England</td>
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<td>Healthwatch</td>
<td></td>
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<td>100</td>
</tr>
</tbody>
</table>
## Appendix 2: Health and Wellbeing Board Scorecard 2017-18

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Indicator</th>
<th>Measurement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outcome 1: Best Start in Life</strong></td>
<td>Breastfeeding Rates</td>
<td>Proportion of infants recorded as being totally breastfed (receiving exclusively breast milk) at 6-8 weeks</td>
</tr>
<tr>
<td></td>
<td>Immunisation</td>
<td>Uptake of second MMR vaccination</td>
</tr>
<tr>
<td>Childhood Healthy Weight</td>
<td>Childhood Healthy Weight</td>
<td>Proportion of children overweight or obese, in Reception Year (4 - 5 years old)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Proportion of children overweight or obese, in Year 6 (10 - 11 years old)</td>
</tr>
<tr>
<td>Readiness for school</td>
<td>Readiness for school</td>
<td>Reached a good level of development at age 5, all children</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Reached a good level of development at age 5, children with Free School Meal Status</td>
</tr>
<tr>
<td>Mental health</td>
<td>Mental health</td>
<td>% of referrals to CAMHS that are made by schools</td>
</tr>
<tr>
<td>Special Educational Needs (SEND)</td>
<td>Special Educational Needs (SEND)</td>
<td>Number/% of completed SEND education health and care (EHC) plans within the 20-week timeline (with and without exception)</td>
</tr>
<tr>
<td>Outcome 2: Healthy, longer, happy lives</td>
<td>Indicator</td>
<td>Measurement</td>
</tr>
<tr>
<td>----------------------------------------</td>
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<td>-------------</td>
</tr>
<tr>
<td>Mental health</td>
<td>People with first episode of psychosis starting treatment with a NICE-recommended package of care treated within 2 weeks of referral</td>
<td></td>
</tr>
<tr>
<td>Housing &amp; Homelessness</td>
<td>Number of households in temporary accommodation</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total gross number of housing completions in financial year by market price and affordable homes</td>
<td></td>
</tr>
<tr>
<td>Unhealthy Lifestyles</td>
<td>Total Quit (at 4 weeks, self-reported) per 100,000 estimated smoking population (aged 18+).</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Proportion of opiate clients that successfully complete treatment i.e. they do not then re present</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Proportion of alcohol clients that successfully complete treatment i.e. they do not re present</td>
<td></td>
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<tr>
<td>Long-term conditions</td>
<td>People with diabetes diagnosed less than a year who attend a structured education course</td>
<td></td>
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<tr>
<td></td>
<td>Cancers diagnosed at early stage</td>
<td></td>
</tr>
<tr>
<td>Sexual health &amp; relationships</td>
<td>Chlamydia detection rate (15-24 year olds)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number of reports of domestic violence to police</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Outcome 3: Thriving maturity and protected community</th>
<th>Indicator</th>
<th>Measurement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute care / hospital admissions</td>
<td>Total unplanned admissions to hospital</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total unplanned readmissions within 28 days of discharge</td>
<td></td>
</tr>
<tr>
<td>Primary Care</td>
<td>Estimated diagnosis rate for people with dementia age 65+</td>
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<tr>
<td></td>
<td>Flu vaccine uptake (Age 65+)</td>
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</tr>
<tr>
<td>Adult social care contributions</td>
<td>Reduced emergency admissions and A&amp;E department attendances for identified residential and nursing homes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number of people at home 91 days post reablement</td>
<td></td>
</tr>
<tr>
<td>Residents’ and patient experience</td>
<td>Increase in number of patients on palliative care register</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Friends and Family Test within acute providers</td>
<td></td>
</tr>
</tbody>
</table>
## Appendix 3: Health and Wellbeing Board Forward Plan 2018-19

<table>
<thead>
<tr>
<th>Meeting date</th>
<th>Reports</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 July 2018</td>
<td>• Strategic priorities, Board scorecard, update on cross-cutting items, Section 106 items, message from the Board and items for the next meeting are standing items</td>
</tr>
</tbody>
</table>
| Priority focus: Housing and health | • Deep Dive: Housing and Health  
• Private Sector Landlord Licensing Scheme  
• Special Educational Needs & Disabilities (SEND) Inspection Response – Update (information)  
• Physical Activity & Sports Strategy 2017-2021 – Update (information)  
• Substance Misuse Strategy (information)  
• Mental Wellbeing Strategy (information) |
| 12 September 2018: Priority focus: Respiratory diseases – air quality and smoking | • Annual Report  
• Deep Dive: respiratory diseases: air quality, smoking cessation and respiratory disease care pathways  
• Housing and Health: follow up discussion |
| 12 December 2018 Priority focus: TBC from Scorecard | • Deep Dive TBC  
• SEND report – update  
• JSNA – update  
• Adult Death Panel – annual report |
| 29 March 2018 Priority focus: TBC from Scorecard | • Deep Dive TBC  
• Reports TBC by Business Management Group |