# Brent Health and Wellbeing Board

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# Joint Health and Wellbeing Strategy:

## Tackling Health Inequalities

2022-2027

# Contents page and foreword

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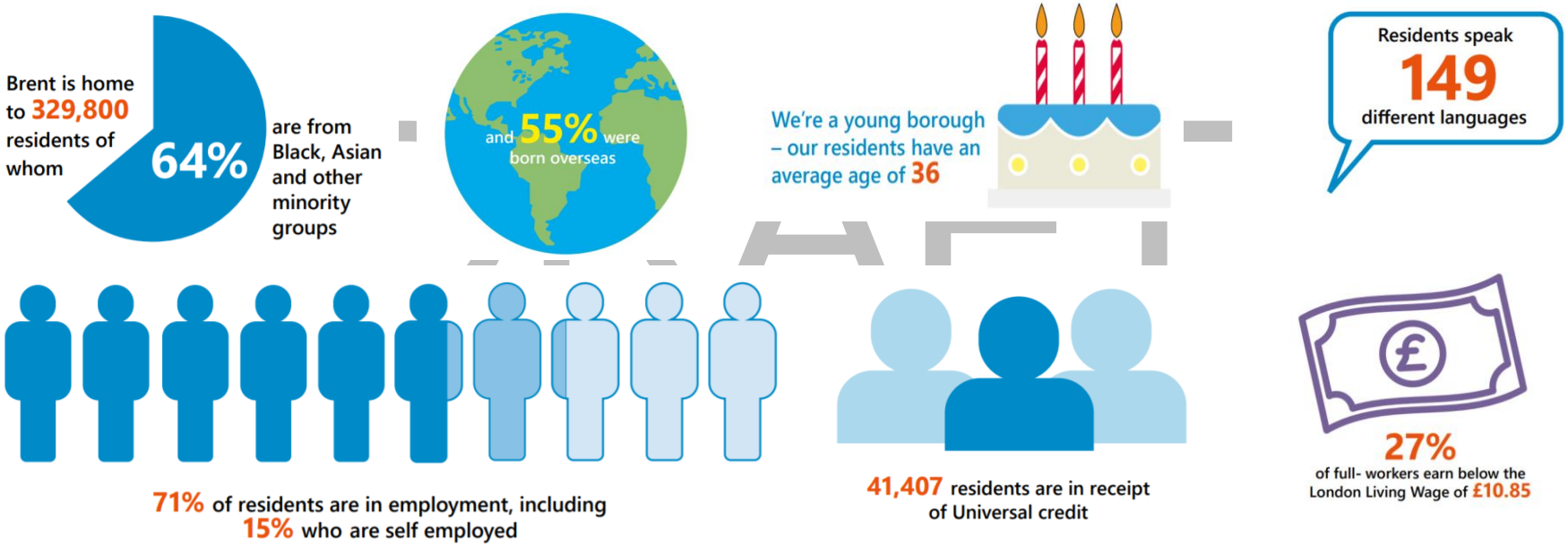
# About Brent

Brent is situated in North West London. It covers an area of 4,325 hectares, making it London's fifteenth largest borough; about 22% of this is green space. It is also the capital's seventh most populous borough, with a population of 329,800. Brent has a young population; the median age is 36, four years below the average for England; 24% of local people are under the age of 18. It is the second most ethnically diverse borough in London - 64% of the local population is from Black, Asian and other minority groups; the largest single group is the Indian population (the fourth largest in London), who comprise 17% of residents. Some 55% of Brent residents were born overseas. The borough has the second largest Hindu population in England and Wales, and the tenth largest Muslim population (as a percentage of the population). Over 149 languages are spoken in the borough; 37% of residents do not have English as their main language – the second highest proportion in London.



# Who is responsible for delivering the JHWS?

The Health and Wellbeing Board is responsible for delivering the Joint Health and Wellbeing Strategy.

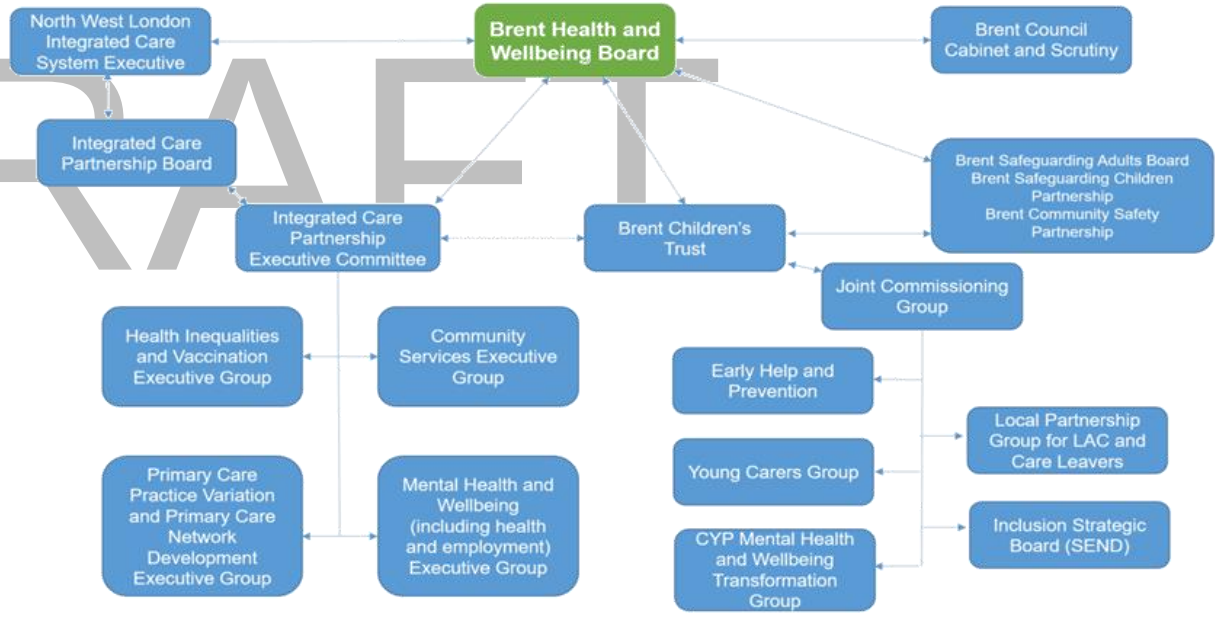
Health and Wellbeing Boards (HWBs) are a statutory forum where political, clinical, professional and community leaders come together to improve the health and wellbeing of their local population.

Health and Wellbeing Boards have a statutory duty to produce a Joint Health and Wellbeing Strategy (JHWS) for their local population, as set out in the Health and Social Care Act 2021. All Board members must have regard for the JHWS in the delivery of their health and wellbeing services and responsibilities.

The **Brent Health and Wellbeing Board** (BHWB) is made up of key partners, with representatives from:

- Brent Council (including Councillors, Public Health, Adult Social Care, and Children and Young People)
- NHS Brent Integrated Care Partnership Executive Committee
- NHS Northwest London Clinical Commissioning Group
- NHS Northwest London Integrated Care System
- Nursing and residential care
- Healthwatch Brent

As well as its statutory role, the BHWB ensures system leadership across commissioners and providers working in Brent. The Joint Health and Wellbeing Strategy (JHWS) outlines the key priorities for the BHWB. A lot of the delivery of the strategy will sit with the Integrated Care Partnership (ICP) and Brent Children's Trust (BCT)..

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healthwatch Brent
NHS North West London Clinical Commissioning Group
NHS Central London Community Healthcare NHS Trust
NHS London North West Healthcare NHS Trust
NHS Central and North West London NHS Foundation Trust

# Key partnerships in delivering the JHWS

The Integrated Care Partnership (ICP) Executive Committee is the place based partnership for Brent within the North West London Integrated Care System. Membership includes:

- Brent Council
- North West London Clinical Commissioning Group (NWL CCG)
- Central and North West London NHS Foundation Trust (CNWL)
- London North West University Healthcare NHS Trust (LNWUHT)
- Central London Community Healthcare NHS Trust (CLCH)

The ICP Executive Committee oversees four sub groups tasked with implementing specific priorities. These are:

- Health inequalities and vaccination
- Primary Care Network (PCN) practice variation and development
- Community and intermediate health and care services
- Mental health and wellbeing

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The ICP is responsible for co-ordinating health and social care services across Brent and will drive the delivery of the JHWS, reporting to the BHWB.

The Brent Children's Trust (BCT) is a statutory strategic partnership body made up of commissioners and key partners. The primary functions of the BCT include commissioning, joint planning and collaborative working to ensure that resources are allocated and used to deliver maximum benefits for children and young people in Brent. The BCT works alongside the ICP to improve the health and wellbeing of young people. The BCT, through its Joint Commissioning Group (JCG), oversees five groups tasked with implementing specific priorities. These are:

- Children and Young People's Mental Health Wellness Group
- Local Partnership Group for Care Experienced Children and Young People
- Inclusion Strategic Board (Children and Young People with Special Educational Needs and/or Disability)
- Early Help and Prevention Group
- Young Carers Champions Group

The BCT will ensure delivery of the JHWS priorities for children and young people, with progress updates provided to the to the BHWB.

Brent healthwatch Brent NHS North West London Clinical Commissioning Group NHS Central London Community Healthcare NHS Trust NHS London North West Healthcare NHS Trust NHS Central and North West London NHS Foundation Trust

# What do we mean by Health and Wellbeing?

Health and wellbeing can be described as the achievement and maintenance of physical fitness and mental stability, as a result of a combination of physical, social, intellectual and emotional elements. This means there are many things that influence our health and wellbeing. It can be affected by a range of factors and conditions such as where we are born, our sex, our age, our education, our job, the food we eat, whether we drink alcohol or smoke and the health services available to us – as the below diagram shows.

# What are Health and Wellbeing Inequalities?

Health inequalities are ultimately differences in the status of people's health, that can be related to a range of different issues that impact on the opportunities they have to lead healthy, well lives. These can include:

- If someone has any health conditions
- If people are able to access treatment when they need it
- The quality of the care and treatment when it is needed
- Behaviours including drinking alcohol and smoking
- Wider socio and economic determinants of health, for example where someone lives, their housing situation, the nature of their job

Often these inequalities can be experienced by different groups of people for example:

- Those living in more deprived areas and other socio-economic factors, for example those on lower incomes
- Younger and older people, those from black and minority ethnic communities and those living with a disability
- Socially excluded groups such as people experiencing homelessness

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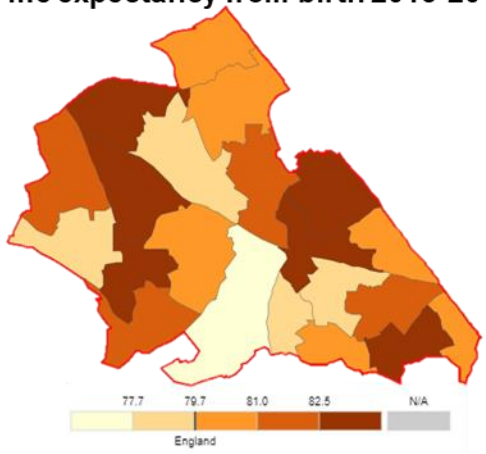
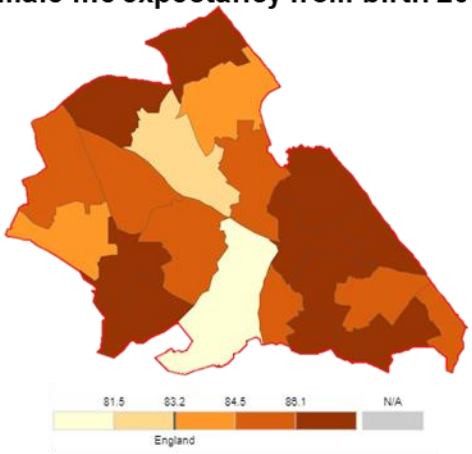
People will experience different and/or multiple combinations of these factors, and this will impact on the health inequalities they experience. A simple way of understanding the impacts of these factors is looking at the inequalities in life expectancy. Life expectancy for males at birth in Brent 2018-2020 80.4 years, female at birth is 85.0 years. These are lower than most of our neighbouring boroughs. There are differences in life expectancy within Brent too:

**Male life expectancy from birth 2015-2019**



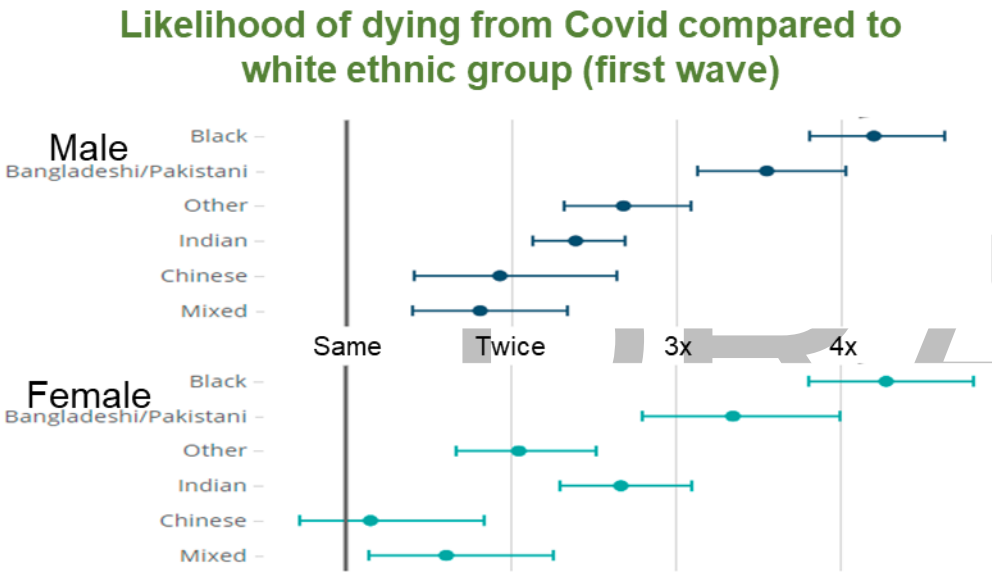

**Female life expectancy from birth 2015-2019**

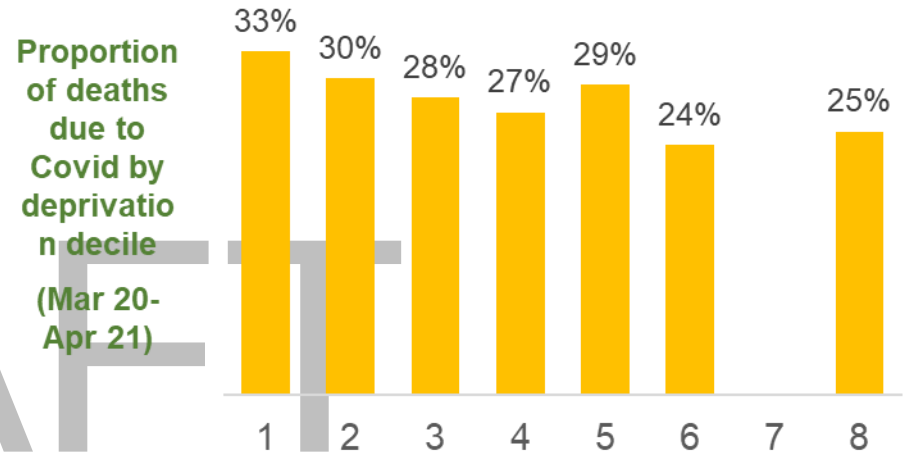


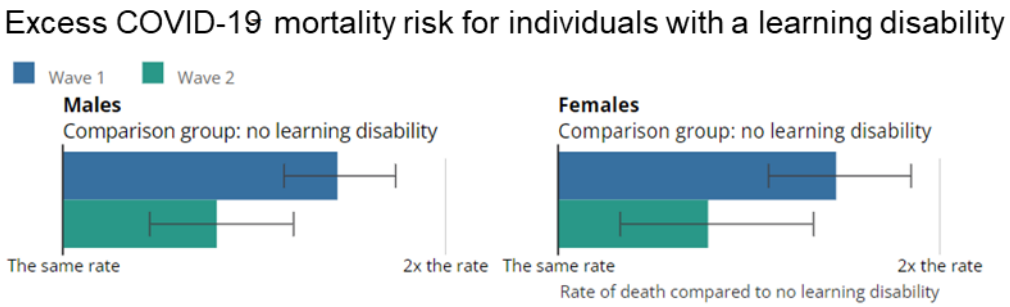
# Covid-19

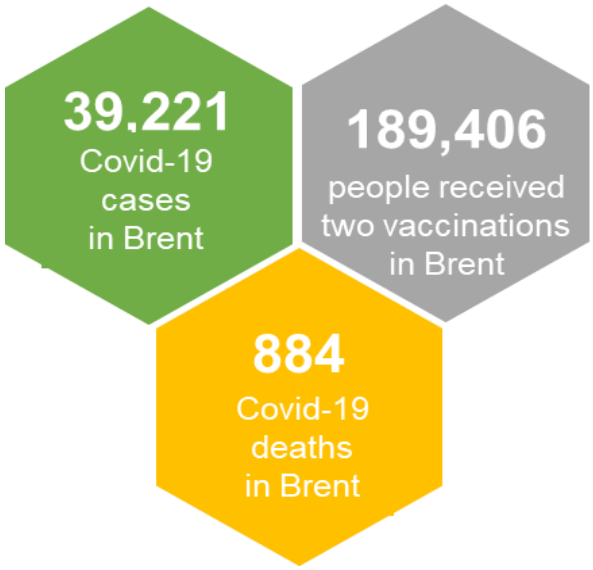
Covid-19 has had a major impact on the world, the country, and right here on Brent communities, where the first wave hit particularly hard. Many people in Brent lost people they loved and cared for, and others are still suffering from Long Covid.

Covid-19 has not affected all communities equally. People with disabilities, from deprived areas or from Black, Bangladeshi and Pakistani ethnicity were more likely to be hospitalised or die if they caught Covid-19, as the below charts show.



# Our Communities and Covid-19

As well as the direct impact of the disease Covid-19, there have been many other impacts on Brent communities. Children and young people have missed out on school and extra-curricula activities. Many people have been furloughed or lost their jobs – in March 2021 one in five workers in Brent were on furlough. People have told us they have experienced isolation as they were cut off from their communities when daily routines changed and when lots of service and interventions moved online. Some people have had to wait for routine appointments and surgeries, or even had them cancelled.

These, and many other impacts of Covid-19 have affected all of our lives in different ways. Schools, parents and children and young people had to adapt to new ways of working. The experiences of children and families were affected by where they lived, whether in large family houses with gardens or flats with no access to private outdoor space. Many workers with desk jobs were able to continue working as organisations adapted and enabled people to work from home. While by direct contrast many workers in the hospitality industry, which closed down during the pandemic, were either placed on furlough or became unemployed as businesses closed down. Throughout workers in low paid work with little job security have been more likely to put themselves at risk of contracting the disease to keep themselves in work.

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Despite this, there were encouraging outcomes from Covid-19 too. Communities came together to look after each other, building resilience and cohesion. Some people took up new hobbies and activities. The reduction in traffic during the first lockdown had a positive impact on air quality. Some services transformed how they operated, and as a result became more accessible and convenient for service users, improving performance.

We now have to work together to recover from the pandemic, and move forward in the best way possible, recovering from the immense strain which has been put on our health and wellbeing and our health, care and wellbeing services.

By autumn 2020/21, UK primary school pupils had experienced 1.8 months of learning loss in reading and 3.7 months in mathematics.

UK Secondary school pupils also experienced a loss of 1.7 months in reading.

Nationally, in spring 2021, learning loss increased in reading & reduced in maths for primary school children - estimated at 2-2.3 months in reading and 3.1-3.6 months in maths.

Source: The Health Foundation, 'Unequal pandemic, fairer recovery: The Covid 19 impact inquiry report' July 2021

# What else do we know?

‘Build Back Fairer: the Covid-19 Marmot Review’ investigated how the pandemic has affected health inequalities in England.

The report highlights that inequalities in social and economic conditions before the pandemic contributed to the high and unequal death toll from Covid-19, as some communities of the UK were more vulnerable than others. The report identified a number of priorities:

- Give every child the best start in life
- Children and young people
- Create fair employment and good work for all
- Ensure a health standard of living
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill health prevention

‘Unequal pandemic, fairer recovery’ is a Covid-19 impact inquiry report has a number of findings we have also considered in the development of this strategy:

- Those younger than 65 in the poorest 10% of areas in England were almost four times more likely to die from Covid-19 than those in the wealthiest 10% of areas.
- Restrictions were necessary but have had wide ranging consequences including unmet health needs, mental health problems, education gaps, lost employment and financial insecurity
- Neighbours started connecting and looking out for each other more than usual and informal support groups in local areas organised to support people in need. By the end of May 2020 over 2,000 groups were listed on the mutual aid website and more than 750,000 NHS volunteers signed up to provide support to vulnerable people through Check In and Chat, Community Response, and NHS Patient Transport.

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# The Joint Health and Wellbeing Strategy

As we have seen from the experience of Covid-19, health and wellbeing inequalities are a major issue in Brent. Different communities have very different health experiences, and very different outcomes from those experiences.

Health inequalities have always been present, but they have been exposed and cruelly exacerbated by the Covid-19 global pandemic.

The BHWB's vision is to work together to reduce health inequalities and wider determinants of health inequalities.

The BHWB believes that the starting point to reducing health inequalities is communities. We need to work with and truly understand our communities, their lives and experiences to work together to come up with solutions that tackle health inequalities and deliver lasting change. We need to think and act differently if we want to achieve different results.

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We have taken a community centred approach to the development of this Joint Health and Wellbeing Strategy. We have worked with Healthwatch Brent to undertake a significant three stage consultation exercise. Everything in this strategy has come from the findings of this consultation with communities, which took place during 2021.

# Community conversations

Working with Healthwatch, the BHWB engaged with communities to understand their priorities for health and wellbeing.

The BHWB held a number of workshops and circulated a digital and physical survey.

We asked people about what was important to them, and those they cared for in relation to their health and wellbeing.

These are some of the things we heard…

Time and money are big barriers for me

There are lots of things happening in the community, but I don't hear about it until it's too late

Green space is really important to our wellbeing

I don't feel safe exercising alone in the park

Prioritise prevention and early intervention

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The mental health of children and young people post pandemic is our big worry

I can't access reasonably priced fresh fruit and veg in my area

There are too many fast food shops

We worry about the impact of the pandemic on our services, like our GPs

# The Strategic Context

Many of the issues communities said impacted upon their health and wellbeing are already being addressed by other strategies owned by BHWB partners. For example Brent Council's Poverty Commission has delivery plans to improve housing standards and access to good quality housing and Brent Council's Climate and Ecological Emergency Strategy outlines activity to make it easier to walk and cycle in Brent. In order to achieve the ambitions of our Joint Health and Wellbeing Strategy, there will need to be delivery across other strategies and plans.

The BHWB will undertake steps to assure themselves of delivery of other relevant strategies and plans, including those outlined below:

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**JHWS**

**NHS long term plan**
- Preventing illness and tackling health inequalities
- Making better use of data
- Integrated care systems

**Poverty Commission**
- Housing
- Employment
- Financial inclusion

**Climate and Ecological Emergency Strategy**
- Nature and green space
- Supporting communities
- The green economy

**Black Community Action Plan**
- Developing community spaces
- Support for employment and enterprise
- Homes and homelessness

**Equalities Strategy**
- Removing barriers to equality
- Provide accessible information and services tailored to needs

**Other strategies**
- Local Plan
- Housing Strategy
- Brent SEND Strategy
- Brent Youth Strategy
- Long-term Transport Strategy
- Addressing health inequality across NWL

&..

# Our Priorities

After full consideration of what we heard during consultation with our communities, and understanding the priorities and plans in other key strategies and plans, the below emerging priorities have been developed for further conversations with communities…

## Healthy Lives

I am able to make the healthy choice and live in a healthy way, for myself and the people I care for.

## Healthy Places

Near me there are safe, clean places where I, and people I care for, can go to relax, exercise for free, meet with like-minded people, and where we can grow our own food.

## Understanding, listening and improving

I, and those I care for, can have our say and contribute better to the way services are run; BHWB data are good quality and give a good picture of health inequalities

## Staying Healthy

I, and the people I care for, understand how to keep ourselves physically and mentally healthy, managing our health conditions using self-care first. We have access to good medical care when we need it.

## Healthy ways of working

The health, care and wellbeing workforce will be happy and strong; and the health and wellbeing system will recover quickly from the impacts of the pandemic.

# Continuing community conversations

Working with Healthwatch, the BHWB then went back to talk to communities to check we had understood everything they told us so far.

We went to many different events and groups to ensure we had captured the health and wellbeing priorities of our residents and workforces correctly.

We also asked people to tell us what are the things we could all – individuals, organisations and communities - do to deliver the priorities?

These are some of the things we heard…

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You must do more for people with a disability to access spaces and services

Could residents be involved in decisions?

I really want equal access to spaces for food growing or community gardens

Things need to be culturally accessible

Young people's needs services should be considered throughout these priorities

We worry about future funding of services we love

You will need to do alternatives for different groups of people to deliver these priorities and tackle inequalities

You've got these priorities bang on

Self management and self care is a fundamental part of my wellbeing – but I need accessible information and support

We need to strengthen engagement and trust

# Priorities

Following on from the community conversations, the BHWB has agreed the priorities for our Joint Health and Wellbeing Strategy as:

- Healthy Lives
- Healthy Places
- Staying Healthy
- Healthy Ways of Working
- Understanding, Listening and Improving

The following infographics capture the key things we heard in the consultation, key facts and data on health inequalities in Brent and some of the key issues within each priority.

We will target our actions outlined in the following sections to make sure those experiencing inequalities most acutely are those who benefit from delivery of this strategy. We will always apply the lenses of deprivation, disability and ethnicity to our understanding of the issues our communities face. By taking this approach, we will reduce the gap between those with the best health outcomes and those with the worst.

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Everyone gets the same.

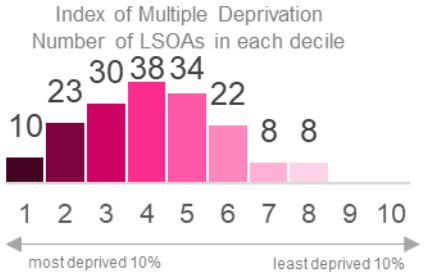
Everyone gets what they need.

The inequality is removed.

# Infographic One

## Deprivation

The pandemic has highlighted the link between health inequalities and poverty




- Poverty varies across Brent and plays a large part in people's ability to make healthy choices.
- According to the Indices of Multiple Deprivation 2019, Stonebridge is the most deprived ward in the borough.

## Alcohol

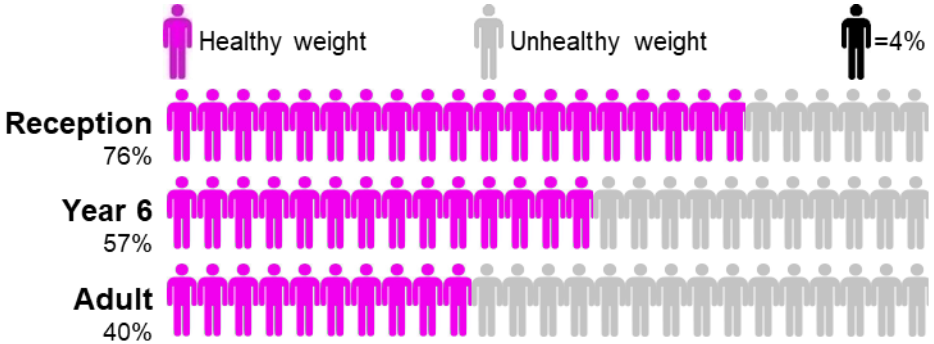
16%

Hospital admissions for alcohol-related conditions increased in 2018/19 to 646 per 100,000

Brent deaths from alcohol-related illnesses are lower than the London average. This may be due to the time lapse between hospital admission and death. We need to tackle alcohol abuse before people become ill.

## Healthy weight

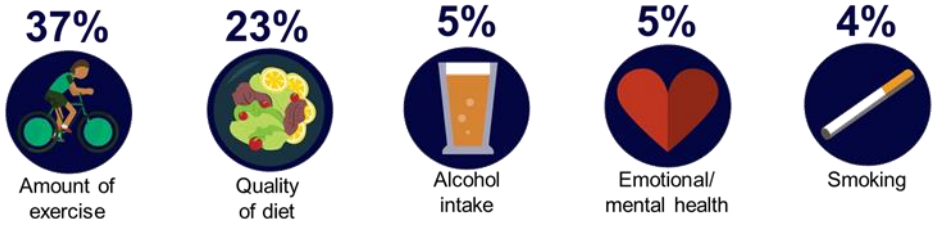
In the consultation people talked about healthy diet and lifestyle as important. Data show healthy weight decreases with age.




# Healthy Lives

**I am able to make the healthy choice and live in a healthy way, for myself and the people I care for**

The 2018 Resident Attitudes Survey (RAS) asked what behaviours people wanted to change to improve their health:




## Barriers

Barriers to residents keeping healthy:

- Financial constraints
- Work/caring constraints
- Lack of motivation
- Language
- Digital exclusion

## Food

Food insecurity and unequal access to fresh fruits and vegetables is a driver and source of health inequality.

Some residents said there are too many fast food shops where they live and not enough fresh fruit and vegetables to buy at a reasonable price near to them.

**59%** of adults regularly eat **five-a-day**

Sources: Brent RAS 2018; PHE fingertips Obesity profile; wider impacts of Covid 19 on health; Local Alcohol Profiles for England; IMD 2019; Healthwatch survey

# 1. Healthy Lives

I am able to make the healthy choice and live in a healthy way, for myself and the people I care for

*You told us that one of the key things for healthy living is healthy eating. You told us one of the biggest barriers to being able to eat healthily is deprivation.*

## We will take a whole system approach to increase the uptake of Healthy Start Vouchers and vitamins

Access to fresh fruit and vegetables depends on where you live. In some areas there are many fruit and vegetable shops selling fresh produce at reasonable prices, but this is not the case for all areas. We know there are food deserts in some local areas. Addressing food poverty and access to foodbanks is included in the Poverty Commission delivery plan, but there is more to be done.

Families with children under four claiming benefits can get help to buy milk, fruit and veg, and pulses. This is through an NHS scheme called Healthy Start. In Brent only 43% of eligible families make use of this scheme. This means there are many deprived families who could benefit but currently don't. We will raise awareness with these families of the scheme, and make sure the vouchers are easily available.

## We will increase sign up to the Healthier Catering Commitment

You said there are too many fast food shops selling unhealthy food across the borough. We have already put policies in place to limit the number of fast food shops in every high street and near secondary schools.

On top of this we will increase the sign up of takeaways to the Healthier Catering Commitment. The award acknowledges businesses that are actively promoting healthier cooking practices that reduce the level of saturated fat, salt and sugar.

## We will create an incredible edible Brent

You said you wanted to have the opportunity to grow your own food, and to learn ways to cook culturally appropriate food. The incredible edible scheme allows for both these things; it enables the community to come together, to learn from experts and each other, and celebrate healthy and nutritious food.

Incredible edible schemes provide opportunities for people to grow food in fun and interesting ways, and learn what to do with the harvested produce. The scheme also aims to support a local food economy. Anyone can join in.

Brent Council will also work with partners to develop a food strategy.

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# 1. Healthy Lives

I am able to make the healthy choice and live in a healthy way, for myself and the people I care for

## We will increase the number of children with a healthy weight, working with families to increase engagement

Upon starting school, 24% of children have an unhealthy weight. By year 6, this increases to 43% of children. We know this continues into adulthood - 60% of adults in Brent have an unhealthy weight. We know that highest levels of unhealthy weight are seen in children from Black families. The Brent 4 Life team supports healthy weight in children and young people. We are developing a new programme to maximise opportunities for engagement to work with families experiencing high levels of deprivation and unhealthy weights. We will ensure the service is culturally relevant through co-production.

## We will improve the oral health of children in Brent

Sadly, children in Brent have very poor oral health. On starting school, 46% of children have at least one decayed, missing or filled tooth.

We have introduced a dental health bus and demand for this has been very high. We will continue to offer this and will target the bus at those areas and for those communities who need it the most.

We will encourage families to take up the offer of free NHS dentistry for their children as well.

## We will work with North West London partners to set up a Tobacco Alliance to reduce smoking

Tobacco use is a powerful driver of health inequalities. It accounts for about half of the difference in life expectancy between the lowest and highest income groups at a national level.
Workers in manual and routine jobs are twice as likely to smoke as those in managerial and professional roles and unemployed people are twice as likely to smoke as those in employment. 29% of adults in Brent with a long term mental health condition smoke. We will work with regional partners to reduce these inequalities.

## We will review alcohol misuse patterns as part of our JSNA

We need to understand how drinking patterns have changed during the Covid-19 pandemic and if those behaviour changes are permanent. Once this has been understood we will review service provision to ensure it is still appropriate and meeting the needs of service users. We will also respond to the recommendations from the Dame Carol Black Independent review of drugs when it is published in 2022.

## We will review gambling patterns as part of our JSNA

Gambling is addictive. We want to ensure our residents can access any help and support they need. The Covid-19 pandemic has changed the way we behave and pushed much activity online. We need to understand gambling behaviours in Brent to take a responsible view so we can support those in difficulty and prevent people from getting into difficulty in the first place

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# 1. Healthy Lives

I am able to make the healthy choice and live in a healthy way, for myself and the people I care for

## We will develop the MESCH programme to work across the system to further improve outcomes

The Maternal Early Childhood Sustained Home-visiting (MECSH) service is a structured programme of home visiting for families at risk of poorer maternal and child health and development outcomes. It is a voluntary programme, delivered as part of a comprehensive, integrated approach to services for young children and their families. Our health visitors deliver the programme, which takes place from the antenatal period until the child is two years old. The programme aims to:

- Support the health and wellbeing of the mother and child
- Support mothers to be aspirational for the future
- Support family and social relationships
- Facilitate child development through parent education
- Provide additional support in response to needs identified

The service builds resilience in families and aims to reduce potential future dependency on other services, including our social care services.

We will develop this service so that delivery happens across services and systems, ensuring a team approach around the mother and child.

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This client was enrolled antenatally. Her child was on a pre-birth Child Protection (CP) Plan. The client had involvement from the Perinatal Mental Health team but they then discharged her as she was mentally stable. By the time her child was 6 months, the CP plan had been de-escalated to a Child in Need plan (CIN) and then closed shortly after.

In Brent the MESCH programme has successfully supported 182 mothers so far:

- 13% young mothers
- 49% families on a safeguarding plan
- 53% families exited safeguarding plan
- 56% maternal mental ill health
- 2% maternal disability
- 2% child disability

### CLIENT REFLECTION

My experience with [MECSH] has been amazing. Leona has really helped me the past two years in becoming more confident as a mother. She is always available to help me and give me advice with whatever I need help with.

I feel very pleased with my experience [during] the past two years and how much help I've received in the last two years and also just having someone to chat to about my son has been really helpful.

Leona has also helped me improve my mental health and had faith in me when nobody else did.

I've learnt a lot of new things over the years and was especially helpful when my son was a new born with tips on feeding and then onto weaning him on to food etc.

She also given me good advice on toys and learning stuff for my son and made me always feel like I'm doing a good job.

I'm so grateful to have had this help the past two years.

Brent Mother

# 1. Healthy Lives: Other strategies

## Climate and Ecological Emergency Strategy

This strategy looks at food waste and how we can cut down on it in a number of different ways:

- re-using leftovers in other meals;
- eating vegetables in season;
- only eating vegetarian food (as it has a lower environmental impact, but is often also healthier);
- encourage food growing on balconies and in pots

## Local Plan

The Development Management section of the Local Plan limits takeaways and gambling premises. Both applications for Shisha cafes and takeaways have a blanket ban within 400m of a secondary school or further education establishment. The proportion of takeaways and gambling premises are also restricted in High Streets and parades of shops.

## Poverty Commission

The Poverty Commission looks in detail at Food Aid and Food Poverty, including foodbanks and food voucher. It has two related recommendations, one about tackling issues post Covid – scaling up the focus on food and fuel poverty, and increasing debt advice, and the other about supporting the sustainability of food aid agencies in the borough.

## Special Educational Needs and Disabilities (SEND) strategy

The SEND strategy has five main priorities, one of which is healthy lifestyles. Within this priority, the strategy aims to support young people to have healthy lifestyles in a number of ways, including opportunities to eat healthily, access to sexual health services, access to emotional health and wellbeing services, and through teaching them to build resilience in education in schools and settings.

## NHS Long Term Plan

Obesity features strongly in the NHS Long Term Plan. The government has pledged to halve childhood obesity and significantly reduce the gap in obesity between children from the most and least deprived areas by 2030. To level up health inequalities, the NHS will provide a targeted support offer and access to weight management services in primary care for people with a diagnosis of type 2 diabetes or hypertension with a BMI of 30+. Nutrition training varies across different medical schools, so the NHS intends to level this up by giving nutrition training a greater place in professional education training.

Hospitals will introduce healthier food options for both staff and patients.

Some hospitals have improved the quality of alcohol-related care, by establishing specialist Alcohol Care Teams (ACTs). ACTs significantly reduced accident and emergency (A&E) attendances, bed days, readmissions and ambulance call-outs. Over the next five years, those hospitals with the highest rate of alcohol dependence-related admissions will be supported to fully establish ACTs

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# Infographic Two

This is us.
This is Brent.
We are English and Irish, Indian and Windrush,
We are Somali, Italian, Romanian, Chinese.
We sing in temples, in pubs and in stadiums.
We speak on the high-roads, in the libraries (shush),
and on the Bakerloo line.
From Stonebridge to Cricklewood
From Queensbury to Queens Park
From Kilburn to Kensal Green,
We are mixing, melding, sharing, cooking,
dancing, praising, raising, playing.
We are unplanned and unfiltered,
We are the first place people come to
and the place people stay.
We are the past, the present and the future.
This is us.
This is Brent.

We are not just a borough of culture,
We are the Borough of Cultures.

## London Borough of Culture Legacy

Four core outcomes have been identified as areas to take forward the Brent 2020 Legacy.

**Pride:** Raising pride in the borough by working to ensure all residents are proud to come from the borough. We do this by platforming histories, residents and culture from the borough through ambitious and exiting cultural programmes.

**Movement in Thinking:** to ensure borough stakeholders recognize the unique cultural power of Brent and mobilise it within their work.

**Skills:** To support young people, artists, communities, schools and teachers to develop skills to harness cultures

**Infrastructure:** To create new places and equip them with creative and cultural certainty

## Parks

Parks are very important for Brent residents. They would like the parks improved, so they can use them more. Residents wanted:

- Safer outdoor spaces
- Community toilets

# Healthy places

Near me there are safe, clean places where I, and people I care for, can go to relax, exercise for free, meet with like-minded people, and where I have the opportunity to grow my own food

## Youth voice

The Youth Survey (our consultation to develop the Youth Strategy) asked "How do you think we can make Brent a better place for young people?"

The second biggest demand was for more activities. Many young people mentioned wanting safe, accessible parks with good facilities in them.

To have more public activities taking place, to be social

More libraries and green spaces, where litter is picked up more often

## Outdoor spaces

Growing your own food has become more popular. Healthwatch's discussions with residents revealed a demand for access to community gardens or spaces to grow food where they could do this.

Green space is important for physical and mental wellbeing. Not everyone has equal access to the suitable outdoor spaces they need to improve their personal wellbeing.

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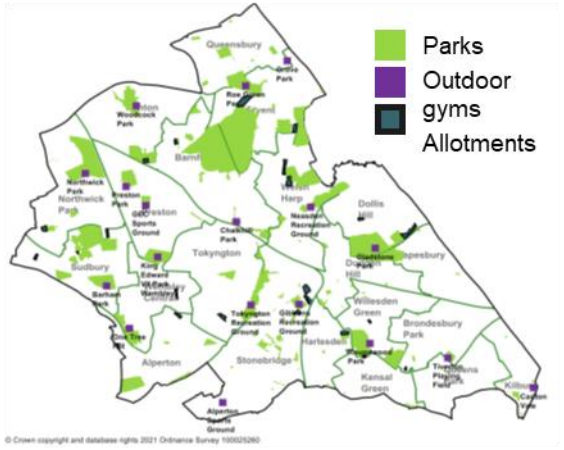
## Parks, outdoor gyms, and allotments




Source: https://www.ons.gov.uk/economy/environmentalaccounts/articles/howhaslockdownchangedourrelationshipwithnature/2021-04-26; https://neweconomics.org/2021/01/escaping-green-deprivation

# 2. Healthy Places

Near me there are safe, clean places where I, and people I care for, can go to exercise for free, meet with like-minded people, relax, and where I have the opportunity to grow my own food

## We will ensure accessible, affordable physical activities for all Brent residents

You told us you wanted more free outdoor exercise opportunities, especially group activities. Young people especially told us they wanted more opportunities for physical activity. Across Brent we have 19 outdoor gyms which are free for the public to access. We also commission Our Parks which provide free classes in parks across Brent. We will map the results from the Resident Attitudes Survey 2021 alongside the Our Parks provision to identify gaps in service that need to be addressed and areas where more promotion is needed, where we will raise awareness of the free exercise opportunities.

## We will increase the number of community and accessible toilets in Brent

You told us time outside was important to your physical health and your mental wellbeing. You told us being able to use a toilet was important, as it allows you to stay outdoors for longer. We also heard from residents with a disability that accessible toilets are really important for them being able to access facilities. We will look for opportunities to create Changing Places toilets in parks across Brent as the relevant funding becomes available. We will also work with businesses to introduce a community toilet scheme.

## We will increase usable green spaces in Brent

You told us you wanted easier access to green space. The incredible, edible scheme we will launch will ensure innovative use of space to create green space. We will also support those wanting to create community gardens to bid for funding. We will create more usable 'pocket parks' and ensure that trees, green space and/or water features are built into all our new build housing developments.

We are working to improve green spaces in Brent Council housing estates. We are removing 'No ball games' signs from our estates, and replacing them with signs that say 'Play here'.

Young people told us they wanted outdoor spaces to be clean and free from litter. They also told us they wanted outdoor spaces where they feel safe, a key element of our contextual safeguarding approach.

Young people and parents told us about their desire for things to do. Recreational, cultural and sporting activities and events can be enriching and rewarding experiences. High quality, inclusive and diverse opportunities that appeal to young people of all backgrounds are essential in enabling them to lead happy and healthy lives. The Youth Strategy has this as a priority action nine.

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# 2. Healthy Places

Near me there are safe, clean places where I, and people I care for, can go to exercise for free, meet with like-minded people, relax, and where I have the opportunity to grow my own food

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## We will improve access for people with a disability to places, parks and events

We heard very clearly that we need to do more to support children and adults with disabilities to access opportunities to access parks, activities and cultural events. We have launched Relaxed performance events, especially designed to be welcoming for people of all ages with learning disabilities, cognitive challenges, sensory impairments, dementia or anyone who would prefer a relaxed environment. We need to continue to maintain and improve physical accessibility to parks, for example improving car park areas and maintaining pathways.

We also heard from parents and carers of young people with Special Educational Needs and Disabilities (SEND) that our outdoor spaces are not SEND friendly, and that it is crucial for parents of children with SEND that these spaces are inclusive and well maintained.

**Case study**

CAM gardening group has been established for several years now and consist of a small group of residents who love to plant and garden. These residents contacted Brent Housing Management (BHM) to request some help with their small vegetable patch, which needed to be rebuilt.

It was agreed with the residents that the playground would be cleaned, the overgrown grass and weeds addressed and there would be a planting day arranged to bring the flower beds and vegetable patches back up to scratch. Volunteers from BHM, Wates and Veolia as well as local residents and Ward Councillors attended this planting event. New planters that included spaces for residents to sit or lean whilst gardening were constructed; walkways cleared, and bushes and trees trimmed.

## We will improve our estates, creating green, safe and healthy places based on what residents say they need

Over the next few years Brent Council will improve housing estates, by talking to the residents, supporting them to identify what will improve their health and wellbeing and then supporting them to implement changes.

# 2. Healthy Places

Near me there are safe, clean places where I, and people I care for, can go to exercise for free, meet with like-minded people, relax, and where I have the opportunity to grow my own food

## We will ensure access to creative experiences for children and young people

You told us creative experiences and activities were important to your wellbeing. We will build a legacy from Brent's year as the London Borough of Culture 2020. Brent Council, working with Young Brent Foundation and Metroland Cultures, will create an innovative, progressive and sustainable arts and cultural offering that is accessible and culturally relevant for children and young people.

As part of this, we have established a Local Cultural Education Partnership (LCEP) that will support access to arts and culture for our most vulnerable children and young people. Working with schools and community organisations, the LCEP will develop a creative offering that can help children and young people build resilience, through supporting their mental health, self-esteem, friendships and relationships. The LCEP will also promote pathways into employment in the creative industries for Brent young people.

## We will expand the use of our family wellbeing centres

In December 2020, eight family wellbeing centres were established across Brent, offering a wide range of services for children, young people and their families. This includes health services (such as access to health visitors, development checks, speech and language therapy for early years) and support and advice for parents and carers (including managing finances, housing advice, jobs clubs, employment advisors). The council and the NHS will work with families and voluntary organisations to expand the use of family wellbeing centres as hubs of support for parents and carers and children and young people.

## We will build on the results of the Healthy Neighbourhood Trials

A Healthy Neighbourhood is a group of residential streets where vehicle traffic that isn't local to the area is either discouraged or removed. The aim is to tackle drivers using residential streets as a short cut, to make it safer and easier to walk and cycle, restore quieter streets and improve air quality.

There are nine areas in Brent where this is currently being trialled.

*The trials were consulted on in October 2021. The outcomes are yet to be published, but the response will be taken into account in the final strategy.*

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# 2. Healthy Places: other strategies

## Poverty Commission

Housing has an enormous impact on health; for the security and comfort it provides as well as the condition of the housing. The commission made nine recommendations about housing, including considering accessibility requirements for those with disabilities, increasing the numbers of affordable homes, and a review of the private rented sector.

## SEND strategy

The SEND strategy includes access to sport and fitness opportunities in Brent for young people; opportunities for young people to socialise and experience culture; supporting young people to live independently as well as to stay in Brent through access to better quality housing, and developing SEND friendly parks and town centres.

## Housing Asset Management Strategy

The strategy commits to understanding the housing stock and providing and maintaining quality, safe homes for our residents. It also will build on residents feedback to provide homes and estates where residents feel proud to live.

## NHS Local Plan

The London Plan is also part of the development plan, and this stipulates internal spacing and standards. We set local standards for external spaces for new build properties and developments which exceed those in the London plan ensuring our residents have ample outdoor space.

## Digital strategy

Brent's digital strategy has different strands including improving residents' access to the internet and their digital skills.

## Climate strategy

The climate strategy is committed to making as many homes as possible in the borough energy efficient. This can also help to reduce fuel poverty and will ensure our residents are living in warm and comfortable homes. Nature and green space is a priority and actions around active Travel and electric vehicles are also included in this strategy, which should have a positive effect on both physical and mental health and wellbeing as well as improving air quality.

## Long Term Transport Strategy

The first objective in Brent's Long Term Transport Strategy is to increase the uptake of sustainable modes, in particular active modes of travel. It also has an objective about improving air quality and reducing vehicular trips.

## Homelessness and Rough Sleeping Strategy

The Homelessness and Rough Sleeping strategy has five commitments:

1. Develop informed, targeted solutions and continually improve
2. Our services are prevention focused, offering the right advice and support to those who need it.
3. Increase the supply of and access to stable and affordable homes in the borough
4. Minimise the use of temporary accommodation
5. Personalise our services to individuals needs

# Infographic Three

## Cancer screening

In 2020, cancer screening in Brent was worse than the national average (for breast, cervical and bowel cancer).

If caught early, there is a higher chance that cancer can be successfully treated

## Risk factors for Long Term Conditions

- Being overweight and inactive can lead to heart disease, strokes, cancer and diabetes.
- Healthy eating and physical activity can reduce this risk.
- Some ethnic groups are more likely to suffer and die from these conditions, along with liver disease and respiratory disease.
- We need to help people with these conditions look after themselves.

Liver disease — 12.9

Respiratory disease — 11.5

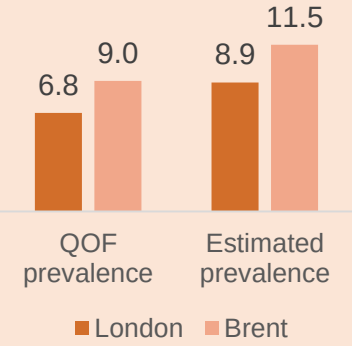
Cancer — 44.4

Heart disease and stroke — 30.6

Diabetes

Under 75 preventable mortality rate (per 100,000 population)

## Diabetes prevalence




**1** in **5** adults have a common mental disorder

# Staying healthy

People understand how to keep themselves physically and mentally healthy. They are able to manage their health conditions using self-care first and have access to good medical care when needed.

The Policy Institute at King's College London found

**43%**

expected their mental health to be worse due to Covid

## Five +1 ways to wellbeing

Building these actions into your daily life can help improve your mental health and wellbeing.

These behaviours may reduce the number of people who develop mental health disorders in the long term.

## Young people

In consultation for the Youth Strategy, young people repeatedly raised concerns about the impact of Covid-19 and lockdown has had on their mental health. Covid-19 has also impacted on the mental health of parents which impacts on their children.

Other risk factors that impact on children and young people's mental health include deprivation and low family incomes, housing pressures and family homelessness.

Brent is worse than the national average for these factors.

## Risk factors

- Socio-economic factors like housing, employment and poverty affect mental health.
- Mental health affects ethnic groups differently.
- Asian people have better mental health overall.
- Black and Irish groups have more mental health hospital admissions.

Source: PHE profiles: children's mental health and wellbeing; public health profiles; mental health and wellbeing; JSNA; https://www.kingsfund.org.uk/publications/health-people-ethnic-minority-groups-england#Overall

# 3. Staying Healthy

I, and the people I care for, understand how to keep ourselves physically and mentally healthy, managing our health conditions using self-care first. We have access to good medical care when we need it.

You told us that self care and self management is a fundamental part of maintaining your health and wellbeing. You told us that your efforts can be frustrated sometimes, and you told of us support you needed in some particular areas – including the need for more and better accessible information, initiatives to address fundamental barriers to access for those from the most deprived communities, a need to secure improved access to services supporting better mental health and prioritising prevention and early intervention rather than crisis management.

**We will develop the strategic approach to children's mental health, working with partners to ensure the needs of all are met**

The impact of the pandemic on children and young people is a big concern for Brent residents, particularly impacts on their mental and physical health. We also listened to what young people said in the development of the Brent Youth Strategy - *"we must not become victims of the pandemic – we must come out the end of it stronger than before".* The impact of multiple lockdowns, where young people have been at risk of isolation and increased vulnerabilities, is at the forefront of their concerns for themselves and their peers. Young people have told us that they are more likely to approach their peers than adults when facing serious challenges, including about not eating, self harming, and challenging home lives. We know that early help is critical – and we will map the pathways and access to support, as well identify any gaps in provision and develop solutions to address them. We will ensure coherence, effectiveness and responsiveness.

In 2020-21 55% of children and young people accessing CAMHS referral services received treatment within 18 weeks of referral (specialist CAMHS)

We will also support the activity contained within the Black Community Action Plan to enable young people to develop personal resilience skills and to deliver a mental health and wellbeing recovery programme, including community based peer to peer support.

**We will work across partners to increase awareness of services, including of the VCS offer, and will ensure support for individuals with mental illness to navigate services to get the right support and the right time**

You also told us you were worried about mental health in adults – at a day to day level and when you needed help for services. You told us about the elements that were important to you in managing your mental wellbeing – they included access to a fair job for a fair wage, and good quality housing. We also know that awareness of mental health and wellbeing services and accessing them is a particular issue for some of you. We also know that when managing mental illness, it is not always easy to get to where you need to be and access the support that you need to recover your mental health.

# 3. Staying Healthy

I, and the people I care for, understand how to keep ourselves physically and mentally healthy, managing our health conditions using self-care first. We have access to good medical care when we need it.

## We will ensure all can access their GP when they need to, and practice variations are reduced

You told us that getting time with your GP when you were unwell was difficult. We also know that there are variations in access, services and outcomes across practices. The BHWB will provide support to GP practices and Primary Care Networks to reduce these variations. We will also support practices to develop and deliver services based on the needs of the people who use them – supporting a population health management approach. This means practices will reduce health and wider determinant of health inequalities experienced by their patients, understand local needs and respond to them. We will work with practices to understand the greatest community need in their area and pilot new, proactive models of care.

We will also work to ensure consistency across the primary care networks and that all are able to access their GPs when they need them, in the way they need to.

Scrutiny Councillors currently have a task group looking at access to GP practices. The task group is gathering evidence to understand how residents can currently access GP practices and what their needs are. The task group will then make recommendations to improve access to GP practices. These findings will be included in the strategy once they are published.

## We will reduce the variation of impact from long term conditions between communities, starting with diabetes

You told us prevention and day to day management were more important than crisis management, and support to prevent people developing or worsening long term health conditions, such as diabetes, was a priority to ensure people lived a healthy, well life for as long as possible.  We will improve the management of long term conditions, particularly diabetes.

We have mapped our diabetes services and we know that to achieve this, we need a whole systems pathway across primary care, community care and the community. We will continue to develop diabetes prevention campaigns and improved diabetes awareness in Brent. We will establish diabetes peer support groups, ensuring these are led in community languages.

# 3. Staying Healthy

I, and the people I care for, understand how to keep ourselves physically and mentally healthy, managing our health conditions using self-care first. We have access to good medical care when we need it.

## We will introduce a mobile health bus, ensuring outreach in areas experiencing health inequalities

You told us about a number of barriers you experience that prevent you from self managing your health and wellbeing. These barriers included time and money. We will take health and wellbeing to where people are and to those who need support to self-care and self-manage the most. We will introduce a health and wellbeing bus. The bus will move around the borough, targeting those areas most affected by health and wider determinant of health inequalities. The bus will ensure access to a range of information and health and wellbeing advice and guidance for residents, near their homes.

## We will increase community awareness and use of services, and address needs in commissioning processes

You told us you don't always know what's available to you. You told us that information, advice and guidance on how people can manage their own health and wellbeing is important, as well as services available to support you. We will ensure services available are mapped and clearly promoted. You told us information needs to be accessible, including the consideration of language, easy read formats and considering digital exclusion. We know that translation of messages into community languages has been effective. We will ensure information, advice and guidance is accessible to all. People with a disability and parents of children with a disability or complex health needs also told us of their difficulty in accessing some services, and adults with a disability told us that there was a need for support and advocacy at a level below the statutory thresholds. We will explore opportunities to provide this advocacy in our commissioning activity.

## We will ensure that children with complex health needs can access the support they need

We know that children with SEND sometimes encounter delays in accessing services. For example, there are waiting lists for Autistic Spectrum Disorder assessments.

We will ensure that children and young people with SEND can access local healthcare. This includes good therapy and community health care, including sexual health and timely access to emotional health and wellbeing services.

# 3. Staying Healthy

I, and the people I care for, understand how to keep ourselves physically and mentally healthy, managing our health conditions using self-care first. We have access to good medical care when we need it.

## We will improve your experience of hospital care

You told us that you wanted excellent hospital care when you needed it. We want our hospitals to be centres of excellence.

We will improve maternity outcomes in our hospital, particularly Northwick Park. We will support and ensure the delivery of the Maternity Services Improvement Plan.

Following the 2020 Ockenden Report, Northwick Park is renewing its maternity services strategy. The strategy includes plans to address health inequalities experienced by service users from ethnic minority backgrounds as well as plans to review how the service communicates with families who do not speak English as a main language. Among other improvement measures, Northwick Park is auditing its risk assessment processes and reviewing antenatal guidelines; it is also developing its own guidelines with other maternity units in north-west London to ensure consistency for all service users.

## We will ensure excellence in our care homes

You told us that people in care homes have been heavily impacted by the Covid-19 pandemic. Brent has 1,152 care beds. (with 792 specialist: 690 nursing beds; 102 residential dementia) Older people told us they wanted to live active, engaged and independent lives, with dignity.

We have in place an Enhanced Care Homes Response team. The team supports care settings with coordinated care, training, crisis management and resilience. It reduces avoidable visits to A&E.

We will refresh our older people's frailty strategy. This will include enhancing our multi disciplinary teams supporting care homes and other patients with frailty and/or complex needs.

Each care home in Brent follows dementia friendly standards.

## We will make sure you have what you need to be safe and well at home

We will ensure effective and integrated discharge from hospital to make sure people have the support and services they need to stay at home.

We will ensure residents are supported under existing rehabilitation and reablement services. Under this scheme residents can avoid unnecessary hospital admissions or reduce their stay in hospital by receiving a reablement package of care for up to four weeks.

Reablement services build on what people can do and support them to regain skills to increase their confidence and independence. These services aim to maximise long-term independence, choice, and quality of life and minimises the need for ongoing support and care.

First Response Teams are a 24 hour community based team providing assessments to people over 18 (including people in need of mental health act assessments) requiring emergency access to acute mental health services including Home Treatment Teams (HTT).

Rapid care and response teams assess patients in their own home within two hours of a telephone referral. In Brent the team is also based in the emergency department of Northwick Park Hospital and assesses patients to prevent hospital admissions.

# 3. Staying Healthy

I, and the people I care for, understand how to keep ourselves physically and mentally healthy, managing our health conditions using self-care first. We have access to good medical care when we need it.

## We will increase take up of vaccinations and testing, targeted at those experience health inequalities and disadvantages

We know Covid-19 has exacerbated health inequalities. We want make sure we address this and reduce health inequalities.

A key part of this will be ensuring the pandemic does not continue to wreak further damage on vulnerable or disadvantaged communities. We have worked to deliver the vaccine programme across Brent, including through vaccination pop up sites close to vaccine hesitant communities, and by introducing a vaccination bus. We have also undertaken a number of community events to talk to communities about the vaccination. We have worked with care homes closely. We have encouraged children with complex health needs and children aged 12-15 who are eligible for vaccines to take up this offer.

We will build on this work and continue to improve the take up of Covid-19 and Flu vaccinations in all communities, particularly those where take up has been lower. We will also prioritise the Covid-19 booster vaccination, particularly for care home residents.

We will build on the community relations developed during the pandemic to ensure we continue to engage with our vulnerable communities moving forward on any area of health improvement. We have developed a programme to engage with the community and improve their health. The programme is called Brent Health Matters. It has recruited Community Health Champions. These Community Health Champions are local people who volunteer their time for the programme and share health messages in their communities.

Another aspect of the programme is its Community Forums. Each forum is an opportunity to connect residents with council and NHS health services to tackle health inequalities.

# 3. Staying Healthy: other strategies

## NHS Long term plan

The NHS Long Term Plan pledges to be more joined up and co-ordinated in its care, more proactive in the services it provides, and more differentiated in its support offer to individuals.
The NHS plans to redesign services over the next five years. It also plans to narrow health inequalities, including those relating to poverty.

## SEND strategy

The SEND strategy will support young people to have healthy lifestyles by delivering timely access to emotional health and wellbeing services and being able to access healthcare locally, meaning that young people who are unwell physically or emotionally know where and how to access support.

## Black Community Action Plan

Brent's Black Community Action Plan has a priority around tackling health inequalities.
It states: "*Covid-19 threw a sharp and painful relief on health inequalities, caused by structural inequalities. BAME communities are disproportionately affected by the pandemic in terms of contracting the virus, mortality rates and other life effects. The council, along with local and regional partners, will examine the full impact and plan for actions to reduce the disproportionate impact on BAME communities as well as identifying and addressing the structural reasons for the inequalities.*"

## Addresssing health inequalities across North West London

The NHS North West London Integrated Care System strategy aims to level up health inequality. It recognises that health inequality exists in a number of different ways, and disproportionally affects those in poverty, and those from Black, Asian, and minority ethnic backgrounds. The strategy recognises these and seeks to understand and address them. "***To do that, we need to work with and truly understand our communities, their different views and cultures and their experience of our services. We need to work together to come up with solutions that influence long-term change and start to tackle our differential outcomes****."* There are four specific areas it addresses: reducing inequalities in health outcomes; reducing inequalities in access; reducing economic/employment impact of our work; reducing inequalities of experience.
One area of initial focus is: "***Working with Primary Care Networks to improve outcomes in a specific clinical area aligned to local priorities***
*As an integrated health and care system, we will be working closely with individual Primary Care Networks and local borough teams to help prioritise and focus on the greatest areas of need in their community and support them to improve outcomes and equity in specific clinical areas such as diabetes."*

# Infographic Four

### The workforce

The pandemic has put great strain on health and council workers. The Guardian reports that "*A quarter of NHS workers are more likely to quit their job than a year ago because they are unhappy about their pay, frustrated by understaffing and exhausted by Covid-19, a survey suggests.*"

The challenge is how to recover; how to catch up on work which has been postponed and provide the care needed.

**1** in **4**
NHS workers are more likely to quit their job than a year ago

### Mutual aid and volunteering

The long term effects of Covid on individuals will affect the recovery and resilience of health and care services. Community action has been a positive aspect of the pandemic. This should be nurtured and developed.

## Healthy ways of working

Our workforce will be healthy and happy; and the health and wellbeing system will recover quickly

Anchor institutions are large public sector organisations unlikely to relocate that have a significant stake in a geographical area – they are 'anchored' in their surrounding communities. Partners in the BHWB are anchor institutions.

### New way of working

In February 2021, the Department for Health and Social Care published a white paper: **Integration and Innovation; working together to improve health and social care for all**.
It introduces Integrated Care Systems across NW London, which comprise of NHS bodies and health and care partnerships:

- ICSs are responsible for NHS strategic planning and funding allocation decisions
- ICS health and care partnerships have a responsibility to develop local plans to address each borough's health and social care needs.

**The number of people who have been waiting over one year from referral to treatment had risen more from 384 in April 2020 to 4351 in June 21**

### North West London Integrated Care System pressures

**As of June 2021, there were over 50,000 people waiting longer than 18 weeks from referral to treatment. This is more than double the number of people from the same time in 2019**

### Within the North West London Integrated Care System

**Our councils, hospitals, GPs and health organisations employ over 60,000 people across our community, in a wide range of jobs.**

Source: https://www.theguardian.com/society/2021/mar/30/one-in-four-nhs-workers-more-likely-to-quit-than-a-year-ago-survey-finds

# 4. Healthy ways of working

Our workforce will be healthy and happy; and the health and wellbeing system will recover quickly

## BHWB anchor institutions will develop and implement social value policies

As anchor organisations, there are a number of practices the partners of the BHWB can do to support the tackling of health inequalities in Brent by having a greater impact on the wider factors influencing health and wellbeing. These include:

- Purchasing more locally and for social benefit, as outlined in Brent Council's procurement and social value policy.
- Working closely with communities and local partners – modelling civic responsibility, spreading good ideas and supporting smaller organisations
- Using our buildings and spaces to support communities
- Reducing our environmental impact, like Brent Council has outlined in it's Climate and Ecological Emergency Strategy
- Supporting local employment, and fair wages for a good job – paying the London Living Wage

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## BHWB will support the delivery of this strategy, and ensure we provide local jobs for local people

A positive impact of the Covid-19 pandemic has been the number of people coming forward as volunteers. We will influence the developing NWL ICS volunteering to employment strategy to ensure there is a clear process and career pathway for the many health and care volunteers. We will also ensure we implement Disability Confident standards across BHWB members.

## We will create a community health and wellbeing projects group to share learning and expertise

We will review grant funding opportunities available for communities to deliver local health and wellbeing initiatives, for example creating community gardens, and how these funding streams support areas and communities affected by greater health inequalities. We will work with communities receiving funding to support the achievement of maximum outcomes. We will also lobby regional and national partners to ensure the appropriate allocation of funding is awarded to Brent based on the needs of our communities.

## The BHWB will ensure the planned hospital care backlog is managed to reduce further health inequalities

The NWL ICS will work to reduce the planned hospital care backlog, ensuring services get back on track and the number of people waiting for support is reduced as quickly as possible. Here in Brent, we will explore options to prioritise those experiencing health inequalities, for example prioritising those who live in more deprived areas, people with a disability or from an ethnic group disproportionately experiencing health inequality.

# 4. Healthy ways of working: other strategies

## Addressing health inequalities across North West London

Domain one of this strategy is "Supporting the local economy". It recognises that the NHS and other public sector partners are large local employers and focuses on how this economic power can be used to improve opportunities for people in this place. It has five main areas of focus:

1. Vaccination centre staff retention – continuing employment or finding volunteering opportunities in the NHS for these staff members
2. A new model for NHS recruitment in north west London which draws on the diverse local talent pool, providing local jobs for local people
3. Skills and training – identify and provide pre-employment training through a local Health and Skills care academy approach
4. Volunteering and employment strategy – develop a clear volunteering to employment policy so there is a clear process for our volunteers
5. Special educational needs and disabilities – increasing the employment of people with a learning disability and autism in the health and care sector

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## Volunteering strategy

Brent Together is the council's commitment to increase the scope of volunteering in Brent, It's overarching aims are:

- People from across Brent's communities, of different backgrounds, feel encouraged and motivated to volunteer their time;
- Brent offers the best possible volunteering opportunities in terms of both range and quality;
- Volunteering is truly inclusive and brings our diverse communities closer together;
- The council leads the way as an example of good practice in volunteering

## Digital strategy

Brent is invested in finding better ways of utilising new and emerging technologies to both improve the customer experience and to rationalise its use of IT systems.

## London North West University Healthcare

One of the goals of London North West University Healthcare (LNWH), which Northwick Park Hospital and Central Middlesex Hospital are part of, is "Engage with staff to develop them and transform services". As part of this they pledge to:

- reduce inequalities in the workplace and improve staff's working lives;
- Implement a transformation programme that trains and empowers our staff to think and act differently to improve patient care, staff experience, and reduces waste.

# Infographic Five

## Collaborative ways of working

- Brent Health Matters was set up by the Health and Wellbeing Board to tackle health inequalities – the avoidable, unfair and systemic differences in health between different groups of people. It is community led.
- It was formed by Brent Council, Brent Clinical Commissioning Group, Central North West London Mental Health Services, Northwick Park Hospital and local GPs and community leaders
- The programme will build a better picture of Brent's health needs, a greater understanding of the challenges different groups face in accessing healthcare and how to overcome them – with communities at the heart of designing the solutions.

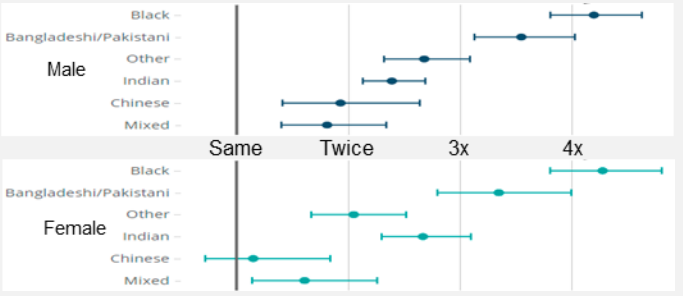
### Understanding, Listening and Improving

I can have my say and contribute better to the way services are run.
Data are good quality and give a good picture of health inequalities

### Data quality

- The pandemic highlighted the impact of disability, ethnicity and deprivation on health inequalities.
- We need a better understanding of the health issues which affect different groups.
- To do this, we need to improve the quality of our data.

**Likelihood of dying from Covid compared to white ethnic group**




Source: https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/coronavirusrelateddeathsbyethnicgroupenglandandwales/2march2020to10april2020

# 5. Understanding, Listening, and Improving

I can have my say and contribute better to the way services are run; Data are good quality and give a good picture of health inequalities

### We will continue to identify and deliver the local health and wellbeing offer through Brent Health Matters

You told us that you wanted our support to tackle health inequalities. We know that communities are best able to identify whether they have the right services, in the right place, at the right time and accessible in the right way for the people who need them. We will work to equip communities that experience the greatest inequalities with resources, tools and investment so that they can decide on sustainable solutions to reducing health inequalities. The Brent Health Matters Programme puts communities in charge. It acknowledges we need a whole systems approach on a hyper local basis to deliver long term change. The programme aims to increase community awareness, increase GP registration, reduce variation in life expectancy and long term health conditions and work with partners to address wider determinant of health. It also works to reduce the impacts of Covid-19 and take up of vaccinations. We have community co-ordinators in post to build community and support community networks. 17 new services or community activities have been set up as a result of BHM. We will continue to invest in and build upon the Brent Health Matters Programme. We will build on our outreach work during Covid-19 to support programmes of health improvement.

### We will improve data collation and use across the system

We have seen the benefits of better collection and use of data through the Covid-19 vaccine programme. Our data has enabled us to identify inequalities and start to tackle them. We will use as granular data as possible in order to inform the best targeting of activity to tackle inequalities – using data at a neighbourhood level to ensure a shared understanding of needs and our responses.

### We will consider health inequalities in our impact assessments

We know that health and wellbeing is affected by a broad range of factors. BHWB partner organisations will ensure within their decision making processes that all equality impact assessments consider health inequalities and embed the responsibility of all in improving health and wellbeing.

### We will continue to digitally innovate, and make sure no one is left behind

We know that digital innovation has meant improved access to services for many. However, you told us that digital exclusion is an issue. People were worried that being digitally excluded would result in being unable to access services. Post Covid-19, an increasing number of services, activities and events are available on line and this will continue as we develop our digital innovations. For many, this makes accessing what they need easier, but we know for some it does not. We will ensure that services remain accessible to all who need it.10

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# 5. Understanding, Listening, and Improving: other strategies

## Digital Strategy

Brent's digital strategy has a number of different strands. There are three strands which aim to improve the digital experience for residents. These are: improving access, connectivity; and skills.
Another strand in the strategy is about how we use data and using data better, including developing and using a data lake. These data can be used to understand our population better.

## Black Community Action Plan

The Black Community Action Plan contains two relevant workstreams; one titled "Supporting the black community and voluntary sector - grant funding to voluntary sector organisations and procurement" which includes actions to review our grants and funding streams and produce options to enable black community projects to flourish and reviewing the support given to the black voluntary and community sector. The other related workstream is titled "Accountability and Engagement". This intends to enable the black community to get involved in the work of the council and partner organisations so their voices are heard.

## Stronger Communities Strategy

The Stronger Communities Strategy includes engaging with new and emerging communities and more generally building a localised approach through the roll out of Hubs across the borough..

## Addressing health inequality across North West London

We have shown the benefits through our vaccination equity programme when we utilise quantitative data and qualitative insights driven by a continuous improvement method and working with local community groups to understand how to best meet local need. There are four overarching messages we will use to define our future work:

1. Communities do more when they decide for themselves
2. Community and faith spaces are the lifeblood of local action
3. Systemic inequalities have a negative impact on the health of our population, in particular the health and wellbeing of vulnerable and excluded communities
4. Measure what people value – work with residents and communities to agree a shared purpose and locally defined, individual, community and system outcomes.

## NHS Long Term Plan

Two of the five ambitions of the current Long Term Plan feed into this priority. One is to give people more control over their own health and the care they receive, encourage more collaboration between GPs, their teams and community services, as 'primary care networks', to increase the services they can provide jointly, and increase the focus on NHS organisations working with their local partners, as 'Integrated Care Systems', to plan and deliver services which meet the needs of their communities. The other is to make better use of data and digital technology: we will provide more convenient access to services and health information for patients, with the new NHS App as a digital 'front door', better access to digital tools and patient records for staff, and improvements to the planning and delivery of services based on the analysis of patient and population data

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# Glossary

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| **HWB** | Health and Wellbeing Boards |
| **BHWB** | Brent Health and Wellbeing Board |
| **NWL ICS** | North West London Integrated Care System |
| **ICP** | Integrated Care Partnership |
| **BCT** | Brent Children's Trust |
| **PCNs** | Primary Care Networks |
| **GPs** | General Practitioners |
| **JHWS** | Joint Brent Health and Wellbeing Strategy |
| **JSNA** | Joint Strategic Needs Assessment |
| **RAS** | Resident Attitudes Survey |
| **MESCH** | Maternal Early Childhood Sustained Home-visiting |
| **SEND** | Special Educational Needs and/or Disabilities |
| **BHM** | Brent Health Matters |
| **BCAP** | Black Community Action Plan |

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