

# Enfield Joint Health and Wellbeing Strategy 2014-2019

## Your Health and Wellbeing • Executive Summary

FINAL – April 2014



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# Foreword and Executive Summary

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## Foreword from the Chair

The vision of Enfield's Health and Wellbeing Board is that the people of the borough live longer, healthier, happier lives. From the results of the consultation, in which over two thousand of you took time out to respond, we were not only heartened by the numbers, but also that the vast majority of you agreed with the vision and the aims of the Health and Wellbeing Board.

In many ways, it is difficult to disagree with this vision. Good health and wellbeing begins with the mother and the unborn child and continues to develop through childhood to influence everything we do. Our mental health, emotional wellbeing, social interaction and physical health all have a significant impact on our educational attainments, employment opportunities, ambitions and achievements. Not to mention how we interact with others, our personal development, family and wider relationships. And it goes without saying, how long we live.

Many of us are now living longer lives. Unfortunately in many cases it is not healthier lives as we may have to contend with one or more life threatening or long term conditions. The pressures on the NHS are increasing and the resources to deal effectively with these challenges are diminishing. To enable people to live longer, healthier, happier lives in this constraining environment can only be achieved through partnerships. A partnership of, on the one hand the Health and Wellbeing Board, and the other the residents of Enfield, and for this strategy to succeed prevention must be at its core.

The Board will undertake to increase positive outcomes in health and social care. For prevention, we will provide opportunities to increase individual and group exercise and encourage changes in those behaviours that we know have negative consequences for our health. The people of Enfield for their part must take advantage of opportunities to engage in activities and adopt behaviours that will encourage healthier lives.

The Board intends to make a real difference by investing in how its members work together and in partnership with local residents, and as we do now, ensure we make fundamental changes and improvements to the lives of local people. The organisations and individuals represented on the Board are committed to making sure there is far more integration between health and social care services, and that the wider determinants to good health and wellbeing continue to be addressed, such as the impact of housing, employment and the environment. Our priorities are supported by a set of actions and measures of success which will enable us to do this.

It will be challenging. Like many other areas of the country, Enfield faces a range of health inequalities and concerns such as growing numbers of children and adults living with obesity, and the increasing prevalence of long term conditions like diabetes, heart disease and dementia. All of which results in many of us dying earlier than we should. This is no more apparent than the stark difference between the east and west of Enfield where those in the east are expected to live significantly shorter lives than those in the west.

Enfield also has a very diverse population and the need to respond to the changes in the demographics such as the ageing population and the boroughs ethnic makeup is essential. We also need to provide better solutions for people who require support with their mental health needs and in general take an approach that is preventative and which supports positive health and wellbeing for all.

We cannot underestimate the impact of the considerable change the public sector is undergoing, not least the significant financial pressures. We know we'll need to implement this strategy with fewer resources, so we will be prudent and focus our efforts where we know we can make a real difference and pool resources where we can and it is right to do so.

We will do this by creating a robust partnership which has the people of Enfield right at its heart. We will respond to the changing expectations and needs of local residents, ensuring greater access to GP's and community based services and supporting residents to manage their own care, thereby avoiding unnecessary use of services and hospital admissions. Where support and services are required, we will make them more accessible and develop them in a coordinated way that avoids unnecessary and repetitive appointments and treatment; whether this is for our mental health and wellbeing, or for physical conditions.

As noted a key part of the development of this strategy was listening to the views of local residents. The responses to the formal consultation and the variety of comments received from the questionnaires and events that took place, made it clear residents want to live healthier lives and take a more active role in their own and others health. Many people said they want to be involved in strengthening local networks and communities, whether this is with neighbours, local community and voluntary groups, led by faith and community leaders, or the private sector. The success of this strategy is largely dependent on how residents and organisations promote and encourage changes in behaviours. Therefore, the strategy includes a number of actions to enable us to build on the success of the consultation and continue the discussions about how we can improve health and wellbeing in the borough.

I would like to thank everybody that has been involved in developing this strategy, in particular local residents for their views and support, the Health and Wellbeing Board, elected Members and individuals who demonstrated their commitment to this important agenda.

Finally, the success of any strategy is in its execution and our first step is to widely communicate what we intend to do. Then we begin the challenging and exciting journey of implementing a strategy which will deliver the best outcome for local residents – to live longer, healthier, happier lives.



**Cllr. Don McGowan**

Cabinet Member Adult Services, Care and Health  
Chair Enfield Health & Wellbeing Board  
Turkey Street Ward

## Our Priorities

Ensuring the best start in life

Enabling people to be safe, independent and well and delivering high quality health and care services

Creating stronger, healthier communities

Reducing health inequalities – narrowing the gap in life expectancy

Promoting healthy lifestyles and making healthy choices

### Executive Summary

Many factors affect health and wellbeing; issues such as unemployment, poor housing and feeling unsafe can all impact upon mental and physical health. The Enfield Health and Wellbeing Board (HWB) will work to mitigate such factors, as well as encouraging people to take a more active role in their own and others health, by promoting healthy weight management through diet and physical activity, controlling excess alcohol intake and supporting people to stop smoking.

This Joint Health and Wellbeing Strategy (JHWS) is as much about wellbeing as it is about health. The HWB is committed to promoting and supporting wellbeing in our local community, enabling local people to live happy, fulfilling lives.

The purpose of this strategy is to set out how the HWB will work with the population of Enfield to improve health and wellbeing across the borough over the next five years.

The HWB is a partnership which brings together the Council, Enfield Clinical Commissioning Group, Healthwatch and the voluntary and community sector. Its roles include producing a Joint Strategic Needs Assessment (JSNA), and responding to that information through the production of a JHWS.

The HWB has already engaged the local community through the consultation on the priorities in this strategy. However, this is just the start of an on-going process. The HWB will engage through a mixture of formal consultations and other activities, with various groups including community and voluntary groups, faith groups, schools and children's groups and patient/service user groups throughout the implementation of this strategy.

This strategy will ensure greater integration between health and social care. The HWB are committed to the aim of supporting individuals to plan and control their care and bring together services to achieve the outcomes important to them. The Board will develop integration plans, which will involve the HWB in dialogue with both the population of Enfield and with local stakeholders.

A detailed description of Enfield and the health and wellbeing of its people can be found within the Enfield JSNA, on the Enfield Health and Wellbeing website<sup>1</sup>. Links to relevant sections of the JSNA have been included in this strategy to give easy access to up to date information on key topics.

The largest cause of death in Enfield is Cardiovascular Disease (CVD) followed by cancer<sup>2</sup>. Much of the burden of early mortality, and its associated morbidity could be avoided by changes in lifestyle. For example:

- Meeting the Chief Medical Officer's guidelines on physical activity reduces the risk of heart disease, stroke and cancer by 30% – in Enfield, 95% of the population is not physically active enough to maximise benefits to their health<sup>3</sup>
- Not smoking reduces the risk of respiratory disease by up to 95% – in Enfield, 18.5% of adults smoke<sup>4</sup>; it is estimated that 4% of 11-15 year olds smoke more than 1 cigarette a week<sup>5</sup>
- In Enfield, 64.2% of the adult population is overweight or obese<sup>6</sup>, and 24.2% of pupils in Year 6 are obese<sup>7</sup>

Further strengthening clinical management of existing disease also plays a key role in reducing associated morbidity and mortality.

There is a stark discrepancy between the life expectancy of the residents of the East and the West of Enfield. Those in the East are expected to live significantly shorter lives than those in the West<sup>8</sup>.

The Health and Wellbeing Board vision is:

***Working together to enable you to live longer, healthier, happier lives in Enfield***

The vision is underpinned by five supporting principles:

- Prevention and early intervention
- Integration
- Equality and diversity
- Addressing health inequalities
- Ensuring good quality services.

**The vision will be delivered through five key priorities, outlined below. For each of these, a number of key strategic actions have been identified, which have been selected as essential areas of work required under each of the health and wellbeing priorities.**

The measures of success tables outline a number of key strategic outcomes the HWB wish to see realised through action in the short, medium and long term. This is not exhaustive, as further measures of success are included in the JHWS detailed action plan and performance framework, to be monitored by the HWB. The action plan is a living document, and will be developed and updated throughout the lifetime of the strategy to ensure that actions and measure of success continue to reflect local needs and challenge partners to deliver improved outcomes for local people.

**Ensuring the best start in life:** we want all children to realise their full potential, helping them to prepare from an early age to be self-sufficient and have a network of support that will enable them to live independent and healthy lives.

<p><b>Short term actions</b></p>	<ul style="list-style-type: none"> <li>• Understand and plan for the implications of the Children’s and Families Bill on the changes for the Special Educational Needs (SEN) system up to age 25, including replacing Statements of Need with a local offer and Birth to 25 Education, Health and Care Plan.</li> <li>• Develop a multi-agency plan for reducing Infant Mortality, with the HWB having oversight of the plan and supporting its implementation. The plan will have a particular focus on child poverty, early access to antenatal services and integrating services.</li> <li>• Manage the transition of the responsibility for health visitors to public health, ensuring improved service delivery.</li> <li>• Enfield Council to host the local health protection forum, and in addition to co-operating with local health promotion campaigns, Enfield Public Health team will develop and implement local targeted health promotion campaigns to increase the uptake of MMR in the borough.</li> </ul>
<p><b>Medium term actions</b></p>	<ul style="list-style-type: none"> <li>• Develop a coherent overarching plan for transition to education for all children aged 2 and above which unifies the Healthy Child Programme and the Early Years Foundation Stage.</li> <li>• Redesign treatment pathways to ensure the delivery of high quality, integrated paediatric care, to provide more community-based care options and to improve the experience and outcomes of children who are ill.</li> <li>• Reduce paediatric admissions for asthma and other ambulatory care sensitive conditions by improving early identification and disease management in primary and community services.</li> <li>• Through more effective use of the School Nursing Service, and closer working with health colleagues, support schools in reducing pupil absence due to illness and medical appointments and thereby improve overall attendance rates.</li> </ul>
<p><b>Long term actions</b></p>	<ul style="list-style-type: none"> <li>• Improve educational attainment by ensuring all agencies involved with children in Enfield work together to provide the best educational experience possible for all children.</li> </ul>

### Ensuring the best start in life – Measures of success

- Child poverty to reduce to 25% by 2020, decreasing from the 2008 baseline of 36%
- Percentage of children receiving the full course of MMR by their 5th birthday to increase from 76.8% to 95% by 2019
- The gap between the most and least deprived wards measured in terms of child poverty to reduce from 42% (based on the 2009 baseline) to 30% by 2020
- 95% of new birth visits to be carried out between 10-14 days after birth
- 95% of pregnant women under the age of 18 who book for maternity care to receive a targeted antenatal intervention from Family Nurse Partnership/Health Visitor Service
- The percentage of absences from school due to illness to improve on the 2012/13 rate of 2.7%

**Enabling people to be safe, independent and well and delivering high quality health and care services:** we want people of every age to live as full a life as possible, with good health and wellbeing being encouraged from the outset. This means that people are encouraged to have lifestyles which help to prevent the onset of some diseases. When they do occur, health issues both physical and mental, should be recognised as soon as possible, as early intervention is likely to lead to better long term outcomes. It also means that where people do have to live with long term conditions, they should be supported in such a way that the condition has as small an impact on their daily life as is feasible. We want to ensure that people with any form of disability or impairment are supported in a way that promotes inclusion, independence, choice and control.

<b>Short term actions</b>	<ul style="list-style-type: none"> <li>• Develop a register of carers which is co-ordinated across primary care, social care, acute care and mental health.</li> <li>• Increase the early diagnosis of HIV infection.</li> </ul>
<b>Medium term actions</b>	<ul style="list-style-type: none"> <li>• Ensure that there is an increased focus on the early identification of long term conditions, in particular diabetes, chronic obstructive pulmonary disease (COPD), dementia, hypertension and CVD.</li> <li>• Develop a network model of primary care to ensure better access to consistent, good quality services with the potential to maintain continuity of care by:             <ul style="list-style-type: none"> <li>– Developing a stable system/model for a more integrated delivery of health care focused around networks and general practices, which in part will support early identification and good disease management.</li> <li>– Implementing a 7 day delivery model for integrated care for older people, which will support reductions in the rate of acute admissions.</li> </ul> </li> <li>• Ensure that more people are able to access psychological therapies (Improving Access to Psychological Therapies – IAPT) locally by increasing uptake of the service through integrated approaches.</li> <li>• Co-ordinating services around the needs of the young person and family to ensure a positive experience of transition to adult services.</li> <li>• Establish an effective model of psychiatric liaison in North Middlesex University Hospital based on the RAID (Rapid Assessment Interface and Discharge) model.</li> <li>• Ensure co-ordinated care provision for people with co-occurring alcohol or substance misuse and mental health problems.</li> <li>• Increase the dementia diagnosis rate and improve dementia care.</li> </ul>
<b>Long term actions</b>	<ul style="list-style-type: none"> <li>• Develop a mental health and wellbeing service which focuses on recovery and independence for people with mental health concerns and aims to limit the number of people who require secondary mental health care.</li> <li>• Develop integrated models of care for older people.</li> <li>• Develop a whole-life mental health strategy.</li> </ul>



**Enabling people to be safe, independent and well and delivering high quality health and care services – Measures of success**

- Late HIV diagnosis to reduce from the 2010 rate of 58% to 44% by 2019
- Access to psychological therapies (IAPT) to improve locally by increasing uptake from the current rate of 5% to 15% by the end of 2014/15
- Rate of admissions for people aged over 65 to residential and nursing care to reduce from 513.5 per 100,000 in 2012/13 to 476.12 per 100,000 in 2014/15
- A measure of bed days lost due to delayed transfers of care to be included, as at publication, awaiting data to inform the following measure: Delayed transfers of care to reduce from x per 100,000 population in 2012/13 to y per 100,000 population by 2014/15
- A composite measure of avoidable emergency admissions to be included, as at publication, awaiting data to inform the following measure: Avoidable admissions to reduce from x per 100,000 population in 2012/13 to y per 100,000 population by 2014/15
- Health-related quality of life for people with long-term conditions to improve from 72.24 in 2012/13 to 75.10 by 2018/19

**Creating stronger, healthier communities:** a large part of the lifetime health and wellbeing experience of people relates not to the health and social care that they receive, but the environment in which they live. People who are able to contribute to society through meaningful employment, live in warm, clean, safe accommodation, and live in a community with strong networks, are less likely to suffer from both mental and physical health issues.

<p><b>Short term actions</b></p>	<ul style="list-style-type: none"> <li>• Develop understanding amongst local people of the role that community cohesion plays in improving health and wellbeing, including reducing loneliness.</li> <li>• Deliver an annual programme of community engagement with those who come from different backgrounds, and ensuring that Enfield residents can continue to contribute to the development and implementation of the JHWS.</li> <li>• Support the outcome of the Home Office review regarding the links between ending gang and youth violence. In particular agree tasks to be overseen and delivered by the partnership represented on the HWB.</li> <li>• Following the publication of the JHWS, HWB to review its structures to ensure effective engagement of local people to improve their health and wellbeing.</li> </ul>
<p><b>Medium term actions</b></p>	<ul style="list-style-type: none"> <li>• To support and work in partnership with faith groups, the voluntary and community sector, schools and children's centres and other local organisations to deliver specific projects aimed at improving community wellbeing.</li> <li>• Partners on the HWB to show leadership by modelling healthy behaviours within their organisations (e.g. healthy eating choices, travel for work policies, work life balance).</li> <li>• Promote dementia friendly communities, which aim to improve awareness, inclusion and quality of life for people living with dementia and support for their carers.</li> </ul>
<p><b>Long term actions</b></p>	<ul style="list-style-type: none"> <li>• Strengthen community networks to enable individuals and families to take responsibility for their own health and wellbeing.</li> <li>• Improve the awareness of people of all ages and communities to make healthy lifestyle choices through positive communication and community interaction.</li> <li>• Building on the agreement with North Middlesex University Hospital, work in partnership with all large public sector providers and partners to promote and expand opportunities for employment, apprenticeships and volunteering for local residents, including children, young people and young parents in Enfield.</li> </ul>

**Creating stronger, healthier communities – Measures of success**

- HWB structures to be reviewed by 2015 to ensure on-going engagement of local people in improving their health and wellbeing
- Faith forums and community leaders to be enabled to take a lead role in improving local health and wellbeing
- Communications and Engagement strategy to be developed and implemented to support the on-going implementation of the JHWS
- The percentage of people who feel safe outside in their local area after dark to increase by 2019

**Reducing health inequalities – narrowing the gap in life expectancy: we want to reduce the gap in life expectancy that exists within the borough, of 8 years for men, and 13 years for women.**

<b>Short term actions</b>	<ul style="list-style-type: none"> <li>• Support implementation of Integrated Care Pathways to improve efficiency and patient experience.</li> <li>• Work with partners and local people in Upper Edmonton to map existing community resources that support health and wellbeing, and identify where gaps exist when compared with evidence-based practice.</li> <li>• Encourage early diagnosis and management (including lifestyle change) of conditions such as CVD, diabetes, cancer and COPD, and work to reduce the risk of death amongst people living with long term conditions.</li> </ul>
<b>Medium term actions</b>	<ul style="list-style-type: none"> <li>• Work with the community to target and deliver specific interventions in Upper Edmonton which address health inequalities in line with the Upper Edmonton action plan.</li> <li>• Reduce smoking rates amongst groups known to be particularly affected by high smoking prevalence.</li> <li>• Further strengthen clinical management of CVD, diabetes and respiratory disease.</li> </ul>
<b>Long term actions</b>	<ul style="list-style-type: none"> <li>• Replicate the successful targeted interventions from the Upper Edmonton action plan to other deprived areas of the borough.</li> <li>• Work to address the wider determinants of health such as high levels of deprivation, low educational attainment, low levels of employment and poor housing.</li> </ul>

**Reducing health inequalities – narrowing the gap in life expectancy – Measures of success**

- 75% of Enfield GP practices to achieve 90% in the percentage of patients with coronary heart disease whose blood pressure is controlled by 2019
- The difference in female life expectancy between the best and worst wards to be reduced from 13 years to 10 years by 2019

**Promoting healthy lifestyles and making healthy choices:** the lifestyle choices that people make about diet, exercise, alcohol consumption, smoking and drug use can affect their health and wellbeing.

We want to ensure that local people understand the impact of these choices, and are supported to choose healthier options throughout their lives, making use of the council's regulatory powers to influence local businesses and make local areas healthy places to live.

<b>Short term actions</b>	<ul style="list-style-type: none"> <li>• Produce a comprehensive obesity strategy, covering both children and adults.</li> <li>• Produce a comprehensive substance misuse strategy, covering both adults and young people.</li> <li>• Health and Education professionals to work jointly to support and promote the Healthy Schools London programme in the borough.</li> </ul>
<b>Medium term actions</b>	<ul style="list-style-type: none"> <li>• Agree an action plan with schools and young persons' organisations to prevent and reduce smoking uptake.</li> <li>• Identify and develop more opportunities to deliver Identification and Brief Advice (IBA) interventions for harmful drinking, particularly through digital customer pathways.</li> <li>• Reduce the rate of alcohol-related acute representations<sup>i</sup> to ensure that treatment is provided in appropriate and cost-effective settings.</li> <li>• Develop healthy workplaces throughout Enfield, for example, improving ease of access and visibility of stairs in office buildings, offering healthy choices in work place canteens.</li> <li>• Promote healthy eating throughout Enfield.</li> </ul>
<b>Long term actions</b>	<ul style="list-style-type: none"> <li>• Ensure that transport and building developments prioritise active transport (particularly walking and cycling).</li> </ul>

### Promoting healthy lifestyles and making healthy choices – Measures of success

- The percentage of year 6 pupils classified as obese to reduce from 24% to 22% by 2019
- The percentage of obese and overweight adults in Enfield to improve from the bottom 5 London boroughs to the top quartile by 2024
- Smoking prevalence to reduce from 18.5% in 2012 to 12% by 2030
- 90% of all drug users in treatment to receive HIV and Hepatitis B interventions, and 90% of injecting drug users to receive Hepatitis C interventions
- The proportion of drug users successfully completing treatment in 2014/15 to increase to 4% above the 2013/14 target rate
- 30% of local authority schools to achieve the Healthy Schools London Bronze Award, and 10% of local authority schools to achieve Silver Award by December 2014

<sup>i</sup> This refers to people who attend or are admitted to hospital on more than one occasion because of alcohol-related illness or injury.

## Next steps

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There are some clear health and wellbeing challenges in Enfield and this strategy demonstrates that the needs of local people vary across the Borough and the importance of working closely with communities and local organisations to meet those needs.

It also sets out the priorities the HWB will focus on with the aim of making a real difference to the lives of Enfield people. There will be a more detailed action plan which will identify leads and outputs to deliver the programme of work as set out in the strategy. The HWB will review the progress of the action plan on a regular basis and will update the plan as required in response to changes in the evidence base (JSNA) and to reflect progress.

The HWB is committed to increasing community engagement in the delivery of the strategy. Successful implementation of the strategy relies on community and stakeholder organisations all of whom have an important part to play in this process.

The strategy will be implemented at a time when there are significant public sector financial cuts, so innovative use of existing resources will become even more important.

The full Health and Wellbeing Strategy will be reviewed in 2018/19.

# References

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