



Hackney's Joint Health and Wellbeing Strategy

2013–2014



City and Hackney
Clinical Commissioning Group



FOREWORD



Hackney's first Joint Health and Wellbeing Strategy sets out our commitment to improving health outcomes and tackling the problems that prevent some Hackney residents from enjoying the fullest, healthiest and happiest lives possible. This Strategy represents the on-going development of our journey to reduce health inequalities and achieve joined-up, holistic services.

The strategy is not intended to be a statement of all that local health organisations and the council will do to support people to be healthier but focuses on a small number of key issues that can be improved through joined up working, shared vision and effective collaboration across a range of partners.

At the heart of our strategy is the drive towards person-centred integrated care and support which is a key imperative to improved health and wellbeing outcomes for our residents. We are also mindful that health and wellbeing is influenced by a wide range of factors such as employment, poverty, housing, education, environment and crime. The Health and Wellbeing Board brings together the key stakeholders for commissioning this strategy which will enable action to be taken to address the underlying determinants of health and wellbeing.

It is more important than ever that we work collaboratively across organisations and sectors to ensure health and wellbeing services are both fit for purpose and sustainable in the long term.

As we develop this strategy further, we look forward to listening to our residents' experience as service users and hearing your valuable views and insight about how we can improve health and wellbeing in Hackney.

A handwritten signature in black ink, appearing to read 'Jonathan McShane'.

Cllr Jonathan McShane
Chair, Hackney Health and Wellbeing Board

1 Introduction



The Health and Social Care Act 2012 has delivered a significant shift in the way that local health services are designed. Primary Care Trusts have been replaced by GP-led organisations called Clinical Commissioning Groups which are responsible for deciding which local health services should be funded. Councils have taken on new responsibilities for public health. Health and Wellbeing Boards are new local bodies that bring together leaders from across public services and the community.

Hackney's Health and Wellbeing Board brings together NHS organisations including the City and Hackney Clinical Commissioning Group, Homerton Hospital and the East London Foundation Trust. The Council's public health, children's and adult social care services are represented alongside local councillors, the voluntary and community sector and service user representation in the form of the new Healthwatch.



The purpose of our Health and Wellbeing Board is to lead and coordinate the collaborative efforts of Hackney's partners to improve health and wellbeing outcomes and reduce health inequalities by identifying and addressing complex health and wellbeing issues which cannot be tackled by a single organisation. In doing this, we will promote the ambitions of the Sustainable Community Strategy that Hackney will be:

“a borough with greater opportunity and prosperity for everyone, whatever their background, and narrowing economic, environmental and health inequality”

This is the first Joint Health and Wellbeing Strategy for Hackney. It is underpinned by the Health and Wellbeing Profile (Joint Strategic Needs Assessment JSNA), which provides the framework for considering the major factors that affect the health and wellbeing of people in Hackney.



2 Hackney Context

Hackney sits on the edge of the City of London and is at the heart of East London, an area increasingly under focus for growth and development. It is the third most densely populated local area in England. The population has grown by just under 20% in 10 years with 40% growth in some wards and the borough is attracting young people, in their twenties and thirties.

Hackney's growth sits alongside long-standing and significant levels of deprivation: Hackney remains the second most deprived local authority in England on the Government's Indices of Multiple Deprivation and all wards are in the top ten percent most deprived wards in the country. In 2012 the Council and Team Hackney, the Local Strategic Partnership, carried out a review of the Sustainable Community Strategy which mapped progress against the strategy's priorities and considered our ongoing challenges.

Against the priority to improve health and wellbeing the review noted that levels of health inequalities reflected the high levels of deprivation. The recorded prevalence of severe mental health conditions and depression is among the highest in London. Despite efforts from a range of local providers to promote healthy eating and active lifestyles, childhood obesity remains above the national average. More than one in nine adults registered with a GP in Hackney are obese; this is the fifth highest rate in London. In 2010, the Male Life Expectancy report was produced along with the Joint Strategic Needs Assessment. This found that smoking was amongst the main causes of premature, preventable deaths alongside cancer and coronary heart disease. Nevertheless significant achievements have been made. Teenage conception rates have declined by 33% from 1999. Women's life expectancy is now above the national average and the gap in men's life expectancy has reduced to less than a year.





Although deprived, the borough has enormous assets in both its physical and community resources. Hackney’s community is one of the most richly diverse in the country and Hackney has historically been a borough that welcomes people from all walks of life and all parts of the globe. This is reflected in the vibrant voluntary and community sector.

The Council and partners have delivered a number of commitments designed to improve the quality of life and promote greater wellbeing for everyone. These include a building programme of estate regeneration and new affordable homes; improvements to local transport and upgrading and increasing capacity in schools. There have been coordinated efforts to continue to reduce crime and more local parks meet green flag standards. There has also been significant investment in local neighbourhoods to promote wellbeing including new neighbourhood play spaces, neighbourhood youth centres and new facilities on Hackney Marshes to encourage people to enjoy active lifestyles.

However, against this backdrop of a growing local economy and investment and improvement in local services, a proportion of local people continue to face persistent inequalities.

Hackney and the other five Olympic and Paralympic Host Boroughs, now known as Growth Boroughs, collectively agreed a legacy programme designed to secure a strong and lasting legacy for Hackney from the Olympics and to secure a ‘level playing field’ or what’s known as economic convergence with the rest of London. This means that within 20 years the communities within the Growth Boroughs will have the same social and economic chances as our neighbours living elsewhere in the capital. This Health and Wellbeing Strategy, with its focus on joined-up, holistic services, will contribute to reducing the convergence gap.



3 Guiding Principles

The Health and Wellbeing Strategy was developed on the following principles which define how Hackney’s Health and Wellbeing Board will operate to address the health and wellbeing priorities for Hackney:



Outcomes: The Board will remain focused on areas where it can demonstrate the difference it brings for those people who need it most

Inequality: The Board will tackle the causes of inequality in health and wellbeing and focus its efforts where needs are greatest

Integration: The Board will ensure that service providers and care pathways will become more integrated with relevant commissioners and providers working together to ensure improvements for residents.

Equality: The Board will ensure that services meet the needs of Hackney’s diverse communities

Additionality: The Board will focus on areas where it has the ambition and ability to add value by working in partnership across the membership organisations to improve health and wellbeing.

Value for money: The Board will ensure the best possible use of resources.

Influence: The Board will assert direct influence where it has it and seek to influence the work of other Boards and agencies too.

Engagement: The Board will encourage all providers to engage with residents, service users and other local stakeholders. Health Watch will have a critical role in this regard.



4 Hackney Joint Health and Wellbeing Strategy

The strategy focuses on a small number of big issues where a more joined up approach will help to improve outcomes and reduce inequalities. The strategy is not intended to be a long list of all the health and wellbeing issues or activities in Hackney, where much work continues. The strategy focuses on issues where the Board can make a real difference and sets out how those needs will be met through the commissioning of services and collaborative action.

The shift towards person-centred integrated care and support is a key imperative to improved health and wellbeing outcomes for our residents. This approach requires further development of relationships and ways of working which take time but the progress of our Intermediate Care work can be seen as a building block of our shared ambitions for integration.

Although the strategy focuses largely on health and social care related factors that influence people's health and wellbeing, we also recognise the importance of addressing the wider determinants of health and wellbeing such as employment, poverty, housing, education, environment and crime.

This is a transitional strategy, outlining what we will deliver in 2013/14. The process to develop a longer term and more fully engaged approach to health and wellbeing in Hackney will take shape alongside the refresh of the JSNA with the intention of producing a refreshed strategy in 2014.

For 2013 to 2014 the Health and Wellbeing Strategy will continue to focus on the four shared priorities that were developed during 2012 when the Health and Wellbeing Board was in Shadow Form:

1. Improving the health of children and young people, in particular tackling childhood obesity and working with pregnant mothers and children under five years old;
2. Controlling the use of tobacco, with a renewed emphasis on stopping people from starting smoking as well as helping them to quit;
3. Promoting mental health, focusing on relieving depression and anxiety for working age adults;
4. Caring for people with dementia, ensuring our services are meeting the needs of the older population.

This strategy presents an overview of these priorities, the planned activities for the future and the outcomes which will be used by the Board to monitor progress.



5. How did we arrive at these priorities?

The City and Hackney Health and Wellbeing Profile provides a comprehensive and rigorous analysis of the issues that need to be considered when planning for the protection and improvement of the health and wellbeing of the people of Hackney. It has been developed through extensive engagement with statutory, community and voluntary sector organisations and residents.

A new process was developed in 2012 to prioritise the needs identified in the profile and this ranking has informed the development of Hackney's Health and Wellbeing Strategy.

The prioritisation framework was based on five key criteria:

Is this an issue which affects a significant proportion of the population (directly or indirectly)?

Is this an issue which significantly affects vulnerable groups?

Is this issue a significant contributor to inequalities in health and wellbeing?

Are there significant unmet needs?

Is the unmet need amenable to intervention?

Additionally, the areas within the matrix were cross-referenced against two further criteria:

outcomes within the NHS, Public Health and Adult Social Care national Outcomes Frameworks. Outliers within the draft Child Health Profile were used as a proxy for outcomes related to the health and wellbeing of children;

areas where a partnership approach through service integration had the potential to make the most difference.

In arriving at these priorities consideration has also been given to the priorities identified by the City & Hackney Clinical Commissioning Group, the Council's Adult Social Care Service and themes identified in the Child Poverty and Family Wellbeing Plan. These priorities have been identified in Appendix 1.

6. Health and Wellbeing Priorities 2013 to 2014

Set out below is a brief summary of each priority describing:

- why it is important to Hackney residents
- the actions being put in place to deliver improved outcomes for Hackney residents
- what we expect to see in the long term if the actions are successful

Whilst some actions are already under way, the delivery plans for others are still under development.

The Health and Wellbeing Board is responsible for overseeing the performance management of this strategy. An action plan is being developed using key outcome measures from the national outcomes frameworks and a set of further local performance indicators are being identified to measure the impact of individual actions

The key outcome measures from the national outcome frameworks have been identified in appendix 2.



6.1 Improving the health of children and young people, in particular tackling childhood obesity and working with pregnant mothers and children aged under five years old

Why is this important for Hackney?

A key message of the Marmot Review is that Giving every child the best start in life is crucial to reducing health inequalities across a person's life as the foundations for many aspects of human development are laid in early childhood and what happens in pregnancy and these early years has lifelong effects on health and wellbeing.

This priority focuses on antenatal care and the health needs of young children up to age five, including support during pregnancy and on reducing inequalities in health and wellbeing amongst children and young people, in particular reducing obesity and excess weight.

Despite efforts in the last few years from a range of local providers to promote healthy eating and active lifestyles, childhood obesity levels in Hackney remain above national average. According to the National Child Measurement Programme, in 2011-12 27% of Hackney children aged 5 were overweight or obese and 43%

of children aged 11 were overweight or obese. Obesity is strongly correlated with deprivation. In Hackney the proportion of children living in poverty has fallen from 44% in 2008 to 40% in 2009, however this remains almost twice the national average for England of 21%.

The rate of early booking for maternity services in Hackney is rising and reached 71% in 2011, however this remains one of the lowest rates in London. The rate is lower amongst Black African, Irish, Vietnamese and Chinese women, it is particularly low amongst the Orthodox Jewish community.

Infant mortality in Hackney is significantly higher than the national average. Infant mortality is associated with smoking, obesity and the uptake of maternity services.

Every year in Hackney there continue to be new cases of diseases that are vaccine-preventable. Although there have been marked improvements in the immunisation of 5 year olds, rates remain below the national target.

Priority Actions

1. Develop a borough wide framework for reducing obesity and promoting healthy weight and healthy lifestyles including:

- Development of healthy lifestyles for families
- Enhancing practitioner effectiveness:
 - to recognise children at risk of obesity early;
 - providing training on how to help parents make lifestyle changes;
 - encouraging practitioners to model healthy lifestyles.

2. Incorporating and strengthening healthy lifestyles within existing services:

- Implementation of a local education and health check at 27 months
- Implementation of school-based school nursing model

3. Develop a comprehensive communications campaign to raise awareness of how to improve health across the borough.

4. Assessment and subsequent roll out where successful of current pilot interventions including:

- the Randal Cremer whole school intervention pilot;
- Children's Centre Healthy Living Intervention
- Play Streets, Play Champions
- HENRY (Health, Exercise, Nutrition for the Really Young)

5. Focus on prevention and early intervention for pregnant mothers and the first 2 years of life:

- Design and implement an effective support model for pregnant mothers and 0-2 year olds

What we expect to see if we get this right

- More children enjoying a healthy weight and enjoying a healthy lifestyle with their families. This will also promote improved focus of children at school contributing to improved educational outcomes for children.
- Fewer children suffering with vaccine-preventable diseases.
- Fewer infant deaths

6.2 Controlling the use of tobacco, with a renewed emphasis on stopping people from starting smoking as well as helping them to quit

Why is this important for Hackney?

This priority focuses on reducing the prevalence of smoking amongst Hackney residents by supporting them to quit smoking and educating residents, particularly children and young people, to prevent them from starting to smoke.

The impact of smoking on the health of local people is profound. Data taken from Public Health England's Local Tobacco Control Profiles show that:

- Among people aged 35 and over in Hackney, between 2008 and 2010, there were 246 deaths per 100,000 residents every year that could be attributed to smoking. This is significantly higher than the averages for London and England.
- Hackney has one of the highest rates of smoking attributable hospital admissions in people aged 35 and over (1602 per 100,000).

In Hackney smoking prevalence is declining but remains high; evidence from the National Integrated Household Survey in 2010 showed that 27% of all Hackney residents are smokers. This is higher than the average for London and neighbouring boroughs.

The great majority of smokers are of working age. Individuals of a lower socio-economic status are more likely to smoke and less likely to be successful when attempting to quit. Smoking is higher than average in the white population and particularly high in the Turkish and Kurdish communities of Hackney. It is also high among Hackney residents with a mental illness.

Priority Actions

The programme of activities aimed at controlling the use of tobacco will focus on 4 areas:

1 Smoke free spaces

- Consultation on park bye-laws to extend smoke free zones to sporting and children's play areas
- Expand the promotion of the smoke free Homes and Cars campaign.
- Consider ways to increase the provision of smoke free areas within the estates of Board member organisations.

2 Smoke free future generation

- Package of resources for whole school engagement
 - Cut films, Operation Smoke Storm, Lesson Plans
- Development of participation of young people eg through Youth hubs, Youth Council

- Promote smoke free homes and cars across all early years settings, schools and youth centres
- Up to date, robust tobacco control policies for all Tobacco Control Alliance members.

3 Smoke free communities

- Maintain high performance of quit services and increase outreach to disadvantaged communities. Time Limited support to poor performing quit services
- Quit services to be made more visible
- More support to staff to support them to quit
- Explore requiring suppliers to have healthy workforce policies

4 Further research to explore the use of tobacco within discrete communities

What we expect to see if we get this right

- Fewer young people starting to smoke
- More people successfully able to quit smoking leading to fewer people with smoking-related medical conditions
- Fewer people requiring health services from causes related to secondary smoking
- Lower staff absence leading to improved productivity in the workforce
- Fewer smoking related fires

6.3 Promoting mental health, focusing on relieving depression and anxiety for working age adults

Why is this important for Hackney?

Mental health means more than just the absence of clinically defined mental illness. Definitions vary, however the need to promote positive mental health, wellbeing or flourishing is increasingly recognised.

Promoting good mental health contributes, not only to lower rates of mental health disorders, but also to improved physical health, better educational performance, greater workforce productivity, improved relationships within families and safer communities.

We know from feedback from service users that people want to continue to live in their own homes and communities and stay active for as long as possible. Delivery of mental health support and wellbeing activities in community settings and interventions that promote recovery and reduce social isolation have been shown to achieve positive outcomes for individuals who are at risk of dependency and needing more specialised mental health services.

We are committed to delivering high quality services to residents that help people live as independently in their neighbourhoods as possible with the right level

of support. The procurement of an Integrated Mental Health Network forms part of the Transforming Adult Social Care programme.

Information in the City and Hackney Wellbeing profile tells us that:

- the prevalence of depression in Hackney GPs' surgeries was 10% in 2010/11, this is the third highest prevalence in London.
- the majority of people claiming Incapacity Benefit and Employment Support Allowance in Hackney do so for reasons relating to mental health.
- common mental disorders such as depression, anxiety and obsessive compulsive disorder are known to be more prevalent in deprived households
- The rate of emergency mental health admissions is the highest in London (2010/11)

Local organisations have reported an increase in young people aged 11- 25 requiring mental health support to deal with issues that include loss and bereavement, depression, anxiety and stress, family or relationship breakdown and emotional difficulties.

Priority Actions

1. Implementation of an Integrated Mental Health Network.

The aims of the Network will be to enable more people to regain independence, improve their quality of life and, thereby, reduce the costs of hospitalisation; placements in institutional care and intensive social care packages of support.

The network will consist of 4 integrated components:

- **A Mental Health Wellbeing and Prevention Service** – a provider managed network embedded in primary care practices
- **A Recovery, Reablement and Social Inclusion Resource Centre** – to work with service users who meet relevant criteria
- **A Creative Arts, Leisure and Culture Network** – personalised support packages for service users with personal budgets
- **A Service User led Involvement Network**

What we expect to see if we get this right

- Fewer people suffering with mental ill health in Hackney
- More people living independently and able to move on from mental health services
- Reduction in the number of suicides
- Better community understanding of mental health reducing the stigma attached to being mentally unwell

6.4 Caring for people with dementia, ensuring our services are meeting the needs of the older population

Why is this important for Hackney?

Dementia is a key national priority and the government's strategy sets out the following areas of focus for improved, local delivery

- improved awareness
- good quality earlier diagnosis and intervention for all
- a higher quality of care in general hospitals
- living well with dementia in care homes

We have also identified dementia as a key local priority. The City and Hackney Health and Wellbeing Profile indicates that the prevalence of diagnosed dementia for older people in Hackney is well below the estimated prevalence for the area. Amongst older people poor mental health can result in increased risk of physical health problems, slower recovery from illness and an

increase in readmission to hospital after discharge. Promoting the health and wellbeing of older people is vital to maintaining independence and reducing the need for more substantial care support.

Dementia impacts both on patients coping with a debilitating, degenerative disease and on their carers who are often elderly themselves and have to cope with an increased carer burden as the illness progresses. We want to ensure that services for people with dementia are appropriate, integrated and personalised to the needs of the patient and their carers and families. We also want to meet the expectations and aspirations of older people who wish to have control over and make choices about their lives.

Priority Actions

The Health and Wellbeing Board endorsed five proposals to deliver a step change in the delivery of dementia services. The Clinical Commissioning Group and Hackney Council Health and Community Services Directorate are working together on the delivery of these activities as a shared priority.

1. Improve data systems between providers.

Integrated communication systems will support the greatest step-change in service users receiving timely and targeted support.

2. Identify resources for carers and carers assessments to be conducted by social care partners routinely

3. Develop a maintained database of resources and make available across the borough.

Information is the greatest tool carers and their cared for have during the dementia journey

4. A dementia awareness programme to be integrated into primary care, social care and all 'first contact' professionals

5. Increased investment in Dementia Advisors

to substantially enlarge their role to include primary care linking and more formal working with local voluntary groups, community workers and Hackney volunteers

What we expect to see if we get this right

- By diagnosing people earlier and providing them with the necessary skills and knowledge to cope with their condition, more people, including family and carers, will live well with dementia.
 - Better assessments and therapeutic support for carers
 - Fewer inpatient admissions to hospital
- A better community understanding of dementia from the public and professionals providing dementia friendly environments and reducing stigma.

7 Next steps

The Health and Wellbeing Board has agreed to refresh the current Joint Strategic Needs Assessment in Autumn 2013. This will require a continued dialogue with Hackney's residents, community groups, health organisations, the Council and local business partners drawing on national and local data and intelligence as well as the wealth of data emerging from the census.

We will use this opportunity to pilot an asset-based approach across a small number of themes. This type of approach values the capacity, skills, knowledge, connections and potential in a community. It doesn't only see the problems that need fixing and the gaps that need filling. An asset can be described as:

- the practical skills, capacity and knowledge of local residents
- the passions and interests of local residents that give them energy for change
- the networks and connections – known as 'social capital' – in a community, including friendships and neighbourliness
- the effectiveness of local community and voluntary associations
- the resources of public, private and third sector organisations that are available to support a community
- the physical and economic resources of a place that enhance well-being.¹

We are working with the voluntary and community sector to conduct some in-depth research to help us to develop community insight around some challenging key public health issues. This programme has been developed to enable different communities to speak directly to policy makers about issues that affect their health, and to have discussions within communities about what factors may support community members to make healthy choices.

When finalised, the refreshed assessment will underpin the development of a second Health & Wellbeing Strategy in 2014 to continue to drive forward effective health improvement in Hackney.

¹ Improvement and Development Agency March 2010. A glass half-full: how an asset can improve community health and wellbeing



APPENDIX 1 - Local Agency Health and Wellbeing Priorities

1 City & Hackney Clinical Commissioning Group (CCG)

CCGs are clinically led groups that include all of the GP practices in the local area. The aim is to give GPs and other clinicians the power to influence commissioning decisions for their patients.

CCGs are accountable to NHS England which oversees the planning, delivery and day-to-day operation of the NHS as set out in the Health and Social Care Act 2012.

NHS England requires that the CCG makes progress against the following four national indicators:

- reduce potential years of life lost from causes considered amenable to healthcare by 3.2%;
- reduction or 0% change in emergency admissions for certain conditions for adults and children;
- improvement in Friends and Family scores for acute inpatients and A&E;
- no cases of MRSA for the CCG's population and CDiff cases are at or below the threshold for the defined threshold for CCGs.

The CCG has also selected the following three local outcomes to be part of the Quality Premium, as reported to the Health and Wellbeing Board:

- proportion of people feeling supported to manage their condition;
- patient reported outcomes for elective knee replacements;
- improving dementia diagnosis rate.

2 Adult Social Care priorities

The Health and Community Services Directorate of Hackney Council has identified the following priorities for the forthcoming year and the Adult Social Care Outcomes Framework measures that these relate to are listed below

- Promoting independence and delaying and reducing need for care and support

The Council will work with its partners to develop services for residents that help people live as independently as possible with minimal interference. There will be a focus on reducing admission to residential care, developing effective preventative services, refreshing reablement in order to maximise independence and facilitate discharge from hospital without delay.

- Delivering high quality, personalised care and support for people

The Adult Social Care Survey measures quality of life, satisfaction with services and feelings of being in control.

- Safeguarding adults at risk

The Council will work to make service users feel safe and those who use services say that those services make them feel safe and secure.

3 Child Poverty and Family Wellbeing Plan

The Child Poverty and Family Wellbeing Plan focuses on what services can do to mitigate the impact of poverty on children and young people's outcomes so that they can thrive regardless of their economic circumstances. It also recognises the importance of services doing what they can to lift families out of poverty by supporting household incomes. Actions in the plan are categorised under six themes:

- excellent universal services committed to improving outcomes for children and families in poverty;
- services are used by children and families who are experiencing poverty or at risk;
- services work effectively in partnership to ensure a coordinated, whole family approach;
- services can demonstrate that they are helping to improve outcomes for those experiencing poverty;
- effective support is provided early and at points in children and young people's lives when support is most needed;
- supporting household incomes

APPENDIX 2 - National framework outcome indicators to support performance measurement

The Health and Wellbeing Board will want to know that it can measure performance and benchmark with other areas. The following outcome measures from the NHS, Public Health and Adult Social Care national outcome frameworks will be used to monitor progress and performance over time.

Health and Wellbeing Priority	Outcome measures
<p>1. Improving the health of children and young people, in particular tackling childhood obesity and working with pregnant mothers and children aged under five years old</p>	<p>Public Health outcomes</p> <p>Domain 2: Health Improvement</p> <p>2.1 Low birth weight of term babies</p> <p>2.2 Breastfeeding</p> <p>2.2 i,ii, iv,v, vi - pregnancy or newborn screening programmes</p> <p>2.3 Smoking status at delivery</p> <p>2.5 Child development at 2-2.5 years</p> <p>2.6 Excess weight in 4-5 and 10-11 year olds</p> <p>Domain 4: Preventing premature mortality</p> <p>4.1 Infant mortality</p> <p>NHS outcomes</p> <p>Domain 1: Preventing people from dying prematurely</p> <p>1.6.1 Infant mortality and neonatal mortality and still births</p> <p>Domain 4: Ensuring that people have a positive experience of care</p> <p>4.5 Improving women and their families' experience of maternity services</p> <p>4.8 Improving children and young people's experience of healthcare</p> <p>Domain 5: Treating and caring for people in a safe environment and protect them from avoidable harm</p> <p>5.5 Admission of full term babies to neonatal care</p>
<p>2. Controlling the use of tobacco, with a renewed emphasis on stopping people from starting smoking as well as helping them to quit</p>	<p>Public Health outcomes</p> <p>Domain 2: Health Improvement</p> <p>2.3 Smoking status at time of delivery</p> <p>2.9 Smoking prevalence – 15 year olds</p> <p>2.14 Smoking prevalence – adults (over 18)</p>
<p>3. Promoting mental health, focusing on relieving depression and anxiety for working age adults</p>	<p>Public Health outcomes</p> <p>Domain 1: Improving the wider determinants of health</p> <p>1.8 Employment for those with a long term health condition including those with a learning difficulty/ disability or mental illness</p> <p>1.11 Domestic abuse</p> <p>1.18 Social connectedness</p> <p>Domain 2: Health Improvement</p> <p>2.23 Self-reported wellbeing</p> <p>Domain 4: Preventing premature mortality</p> <p>4.9 Excess under 75 mortality in adults with serious mental illness (shared with NHS)</p> <p>4.10 Suicide</p> <p>NHS outcomes</p> <p>Domain 2: Enhancing quality of life for people with long-term conditions</p> <p>2.5 Employment of people with mental illness (shared with Adult Social Care)</p> <p>Domain 4: Ensuring that people have a positive experience of care</p> <p>4.7 Patient experience of community mental health services</p> <p>Adult Social Care outcomes</p> <p>Domain 1: Enhancing quality of life for people with care and support needs</p> <p>1h Proportion of adults in contact with secondary mental health services living independently, with or without support</p>

Health and Wellbeing Priority	Outcome measures
<p>4. Caring for people with dementia, ensuring our services are meeting the needs of the older population</p>	<p>Public Health outcomes</p> <p>Domain 4: Preventing premature mortality</p> <p>4.13 Health related quality of life for older people</p> <p>4.16 Estimated diagnosis rate for people with dementia</p> <p>NHS outcomes</p> <p>Domain 2: Enhancing quality of life for people with long-term conditions</p> <p>2.1 Proportion of people feeling supported to manage their condition.</p> <p>2.6 i Estimated diagnosis rate for people with dementia</p> <p>2.6 iiA measure of the effectiveness of post-diagnosis care in sustaining independence and improving quality of life</p> <p>Domain 3: Helping people to recover from episodes of ill health or following injury</p> <p>3.6 Improving recovery from fragility fractures</p> <p>3.7 Helping older people to recover independence after illness or injury (shared with Adult Social Care)</p> <p>Adult Social Care outcomes</p> <p>Domain 1: Enhancing quality of life for people with care and support needs</p> <p>1B Proportion of people who use services who have control over their daily life</p> <p>1D Carer-reported quality of life</p> <p>1I. Proportion of people who use services and their carers, who reported that they had as much social contact as they would like</p> <p>Domain 2: Delaying and reducing the need for care and support</p> <p>2F Dementia a measure of the effectiveness of post diagnosis care in sustaining independence and improving quality of life</p> <p>Domain 3: Ensuring that people have a positive experience of care and support</p> <p>3A Overall satisfaction of people who use services with their care and support</p> <p>3B. Overall satisfaction of carers with social services</p> <p>3C The proportion of carers who report that they have been included or consulted in discussions about the person they care for</p> <p>3D The proportion of people who use services and carers who find it easy to find information about support</p> <p>3E Improving people's experience of integrated care</p>

APPENDIX 3 - Working in Partnership to Improve Health & Wellbeing – Board Membership

Hackney's Health and Wellbeing Board membership is as follows:

Board Members	
Cllr Jonathan McShane Cabinet Member, Health, Social Care and Culture (Chair)	Dr Clare Highton Chair, City and Hackney Clinical Commissioning Group (Vice Chair)
Tracey Fletcher Chief Executive, Homerton University Hospital NHS Foundation Trust	Kim Wright Corporate Director, Health and Community Services, Hackney Council
Alan Wood Corporate Director, Children's Services, Hackney Council	Cllr Rita Krishna Cabinet Member, Children's Services
Dr Robert Dolan Chief Executive, East London Foundation Trust	Dr Sohail Bhatti Interim Director of Public Health, Hackney Council
Emma Craig Chair, Hackney Healthwatch	Michael Kerin Chief Executive, St Joseph's Hospice Representing Health & Social Care Forum

NHS England Representative	
Neil Roberts Head of Primary Care NHS England London Central, North & East	

Independent Advisers	
Jim Gamble Chair, City & Hackney Safeguarding Children Board	Fran Pearson Chair, City and Hackney Safeguarding Adults Partnership Board

Additional attendees	
Paul Haigh Chief Officer, City & Hackney Clinical Commissioning Group	Sonia Davis Chief Inspector, Metropolitan Police
Raj Radia Vice Chair Local Pharmaceutical Committee	Yvonne Arrowsmith Group Operations Director, Family Mosaic Better Homes Partnership
Devora Wolfson Assistant Director, Commissioning Hackney Council	James Palmer Head of Public Health Service Hackney Council
Jackie Brett Health & Social Care Forum	Amy Wilkinson Children's Health & Wellbeing Manager Hackney Council
David Rees Governance Services Manager Hackney Council	Elaine Peers Head of Strategic Health & Wellbeing Hackney Council
Roxanne Misir Governance Services Officer (Minutes)	

