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**Merton Council**  
**Health and Wellbeing Board**  
**23 November 2021**  
**Supplementary agenda**

5 Health and Social Care Recovery Priorities

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## Committee: Health and Wellbeing Board

Date: 23 November 2021

Wards: ALL

## Subject: Refresh of Merton Local Health and Care Plan 2022-24

Lead officer: Mark Creelman, Locality Executive Director, Merton and Wandsworth NHS South West London Clinical Commissioning Group (CCG)

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### Recommendations:

- A. To agree the summary of the refreshed Merton Local Health and Care Plan 2022-24
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### 1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1. To propose that members agree the summary of the refreshed Merton Local Health and Care Plan 2022-2024.

### 2 BACKGROUND

- 2.1. During Summer 2021 a programme of work was undertaken to refresh the Merton Local Health and Care Plan (LHCP). An update was provided to the Health and Wellbeing Board on progress in September 2021, and this paper now provides a draft version of the refreshed LHCP summary for approval.

### 3 DETAILS

- 3.1. Delivery of the Merton Local Health and Care Plan (LHCP) has been a key programme of work undertaken by health, social care, and voluntary sector partners in Merton to improve health and wellbeing. The original Merton LHCP (2019-2021) described the vision, eight key priorities and actions to meet the health and care needs of local people and deliver improvements in their health and wellbeing through the life stages of: start well, live well and age well. It was focused on the areas where, over the two years (2019-2021), partners could have the greatest impact by working collectively, and delivery has been overseen by the Merton Health and Care Together Board.
- 3.2. It was developed in partnership with local people and stakeholders with a wide range of co-production between August 2018 and July 2019, hearing what they wanted from health and care services and testing ideas at different stages in the development of the plan. Following the impact of Covid19 and as South West London transitions to an Integrated Care System (ICS), a refresh of the Merton LHCP has been undertaken over the summer of 2021.
- 3.3. A wide range of engagement was undertaken to facilitate this refresh, both to inform the future plan, and on the draft documentation itself. This is described in section 5 below, and the Health and Wellbeing Board is now asked to approve this summary of the refreshed LHCP.

## **4 ALTERNATIVE OPTIONS**

- 4.1. The alternative option is for further work to continue on developing the LHCP.

## **5 CONSULTATION UNDERTAKEN OR PROPOSED**

- 5.1. A wide range of consultation, engagement, and work has been undertaken on the refresh of the LHCP including:

- Start Well, Live Well and Age Well workshops jointly facilitated by the place-based Transition Team in Merton through August and September 2021
- Input from public health and alignment with the refreshed Joint Strategic Needs Assessment (The Merton Story 2021) and the emerging Population Health Management work being developed by South West London CCG to ensure that the plan is evidenced based and responding to the needs of residents
- A review of progress made on the priorities already within the plan to ensure the refresh builds on momentum and delivery that has already happened, with input from all transition team partner organisations
- Further engagement with wide range of partners and stakeholders through an online survey and linking in with the outputs of the Your Merton survey
- Attending further sessions with community groups and organisations across Merton to discuss the LHCP refresh e.g. Merton Centre for Independent Living, Covid Community Champions, CCG's Merton Patient Engagement Group etc.
- Linking into the newly established Merton partnership Communications and Engagement Forum
- Progress updates to the SWL ICS Place Based Leaders meeting and the Health and Wellbeing Board

- 5.2. Consultation and engagement on the draft document and branding has also been undertaken with: the transition team, the Merton partnership Communication and Engagement Forum, the Patient Engagement Group, and the Merton Health and Care Together Board. Additionally, the draft summary appended to this report has been made publicly available on the CCG website to enable wider feedback from community groups that have been engaged, and the general public.

## **6 TIMETABLE**

- 6.1. The original timetable for the refresh envisaged approval of the LHCP by the November 2021 Health and Wellbeing Board.

## **7 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS**

- 7.1. N/A

## **8 LEGAL AND STATUTORY IMPLICATIONS**

- 8.1. N/A

**9 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS**

9.1. The focus of the LHCP is on reducing health inequalities and promoting ongoing dialogue with stakeholders, and increased community engagement in the delivery of the plan across Merton's communities.

**10 CRIME AND DISORDER IMPLICATIONS**

N/A

**11 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS**

N/A

**12 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT**

*DRAFT Merton Health and Care Plan Summary 2022-2024 – refreshed following the pandemic*

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# Merton Health and Care Plan DRAFT 2022–2024

Refreshed following the pandemic

Start well | Live well | Age well

# Merton

Health, care and community organisations in Merton have worked closely for many years and, since the pandemic, remain committed to reduce inequalities, join up services and make real differences to people's lives. Our refreshed health and care plan for 2022-2024 is just one element of work in Merton to continue to improve health and wellbeing post Covid. It highlights projects where we can have the greatest impact by working together.

## Start Well

**Increase in vulnerabilities for children and young people and worse mental health due to COVID-19**



**Staying safe, enjoying & achieving**

- ↑ Child Poverty
- Worsening parental mental health and substance misuse
- ↑ Domestic violence
- ↑ Child protection plan
- ↑ Educational attainment gap



**Being healthy**

- Poorer mental health
- ↑ Self-harm
- Healthy weight challenges:
  - ↑ Obesity gap
  - ↑ Food poverty
  - ↑ Eating disorders
- Immunisations interrupted

## Live Well

**Many residents have unhealthy lifestyles and poor mental wellbeing, exacerbated by COVID-19**



**Obesity**

- Half residents overweight
- ↑ Food parcel use ↓ Physical activity



**Alcohol/Drugs**

- ↑ Alcohol-specific deaths
- ↑ Nationally in drug-related deaths



**Smoking**

- 1 in 7 residents smoke
- ↑ Smoking cessation during COVID



**Sexual Health**

- ↓ Service use during COVID
- ↑ Shyphilis and Genital chlamydia pre-COVID



**Mental Health**

- 1 in 5 report anxiety
- ↑ Loneliness
- Poorer mental health for those shielding



## Age Well

Many residents with multi-morbidity and complex needs; prevention and management of Long Term Conditions impacted by COVID-19



### Frailty & Dementia

Deconditioning

↓ Dementia diagnosis ↑ Falls



### Disability

↑ Loneliness ↑ Burden on carers

Digital exclusion



### Cancer

Delays in:

Diagnosis

Treatment

Screening

## Merton as a Healthy Place

Boroughs with many assets, challenges include housing shortage and employment gap, increased by COVID-19



### Assets

Diverse green spaces

Good transport links

Low crime

Good schools

Resourceful libraries

Active voluntary and community sector



### Challenges

Affordable housing

Insecure employment (↑ in East)

Air pollution

Climate change

Cycling infrastructure behind

neighbouring boroughs

Street drinking



## What people have told us



We need to listen to communities and people in Merton in their own spaces and environments to understand their health and wellbeing needs and invest in and empower them.



Cultural sensitivity needs to be considered in all work we plan and deliver, and communities need to be part of this.



Mental health and emotional wellbeing are vitally important across Start Well, Live Well and Age Well, and we must also consider the impact of Covid-19 on mental health.



Prevention and early intervention are key, together with the social determinants of good health and wellbeing, eg employment, housing, finance and social networks.



Improved information and communication about local services available is needed across the whole health, care and voluntary sector and efforts to raise awareness about how to access support.



We must consider living and working environments, and how developing Merton as a healthy place can improve health and wellbeing. Regenerating high streets and making best use of green space is key.

## Our vision

After talking to our community, we have collectively refreshed our vision to:

“Working together to reduce inequalities and provide truly joined up health and care services with and for all people in Merton, so they start, live and age well in a healthy place”



### Start well

We want all children in Merton, regardless of their background or circumstances, to have the support and care they need to grow and thrive.

We will work to change the way young people access health and wellbeing services, continuing to develop support in the places they already go, such as schools and community-based locations.



### Live well

We want to better support working-age adults in Merton to improve their health and wellbeing.

We want to make sure services are delivered in, and with, our diverse communities. We will pilot health and wellbeing offers on high streets and in community and faith venues. We will develop more options for people to personalise their care, based on needs, and focus on physical, mental health, and social issues, such as employment.



### Age well

We want to connect older people with community networks in new and different ways post Covid.

We will work with the voluntary and community sector to support older people to re-engage with and access community resources for their health and wellbeing post Covid. We want to ensure people's needs are matched with the services available.



## What we've achieved so far

Health and care partners already collaborate closely in Merton. Integrated working between the NHS, adult social care and the voluntary sector, led by the Community Response Hub, ensured rapid discharge from hospital, and easily accessible support for vulnerable people during the pandemic.

Mental health support teams are now in place in schools, building emotional resilience in young people from an early age. Merton Uplift continues to develop its counselling services for those with common adult mental health problems, and a wellbeing service, linking people into community activities.

There are six established primary care networks of GP practices covering Merton, with significant progress in rolling out social prescribing, especially in East Merton, where need is greater.

Across Merton we now have a network of diabetes champions, who work with us and the council, helping local people understand more about the condition. Our champions share their experience to help others with diabetes live longer and more confident lives. Our integrated locality teams, based around primary care networks, support older people with complex needs to receive more joined-up care.



## Our plans

Across all our plans we aim to:

- Reduce health inequalities and embed equity.
- Use a population health management approach to drive change.
- Focus on sustainability and making Merton a healthy place.
- Engage with service users, patients and communities so all work is developed with and by people in Merton.



### What will we do?



Thinking about how we keep people well in their neighbourhoods



#### Change how people can access health and wellbeing services

- Pilot a Health on the High Street hub approach.
- Pilot an Ethnicity and Mental Health Improvement Project (EMHIP) hub in Merton.
- Empower the voluntary and community sector to re-engage older people with services as the community hub develops.
- Develop more options for people to personalise their care.



Thinking about how people get better joined up care when they do access services



#### Improve access to and information on services

- Build on learning from the vaccination programme to reach all communities and promote all primary care services eg pharmacy, optometry.
- Develop new roles and approaches eg have mental health workers in each primary care network, working alongside health and wellbeing coaches.
- Better connect professionals across community multi-disciplinary teams.



Thinking about how we provide comprehensive support for people with more complex needs



## Focus on specific issues

- Focus on mental health and emotional wellbeing for Start Well – piloting a children and young people's emotional wellbeing hub.
- Focus on prevention for Live Well – continuing established work on diabetes and obesity, and also now long Covid, cancer and tackling increased alcohol consumption.
- Focus on frailty for Age Well – scoping a new frailty service model based in the community.

We will ensure the right enablers are put in place for our plans such as digital provision where appropriate, and the right estates for example, supporting the development of the Mitcham Wellbeing Hub.

We are also committed to continuing to protect people in Merton against Covid both by providing care, and through ongoing development of our vaccination offer.



## A new approach to engagement and delivery of our plan

We want to ensure we engage and co-produce our delivery plans with local communities – so we can develop the best approaches possible which meet people's needs.

The feedback we've received so far has underlined the need to do this through ongoing discussion with the people we serve.

Our approach to engagement will:

- Be led by the community and their needs – ask and respond to how they would like to be engaged or involved.
- Develop ongoing conversations and sustainable relationships – listen and understand – build on those established relationships.
- Use creative methods to reach more people, particularly communities experiencing health inequalities and poorer health outcomes, being mindful of the digitally excluded.
- Be proactive and connect with people outside of planned or routine engagement processes.
- Work with trusted leaders to speak with local people and communities.
- Use population health data and insight to inform, adapt and shape our approach.

## How will we know if we've made a difference?

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We will work with our communities and stakeholders to define key outcomes, and measure in detail if we have made a difference. We want to see:



**Improved health and wellbeing of children and young people**



**Improved access to mental health services for young people**



**Increased numbers of people accessing services through the voluntary sector**



**Increased recovery rates for adults experiencing mental health problems**



**Improved access, experience and outcomes for those from Black, Asian and other. minority ethnic groups in the borough**



**A reduction in loneliness and isolation reported in older people**