

PUBLIC HEALTH'S ROLE ON INTERGRATION



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The Richmond story

Richmond - Healthy, safe and asset-rich

Population

193,585



Employment

79.6%

working-age adults are in employment
the highest rate in London



49%

volunteer
highest rate in London (26%)



International Sporting Events



Home to the
2015 Rugby World Cup



a host borough for the
2012 Olympics

a host borough for the annual
Ride London event

Life expectancy at birth

81.9
years for men
(1.9 years greater than London)



85.9
years for women
(1.8 years greater than London)

Education

A borough with some of the highest performing primary and secondary schools in the country



Community safety

4th OUT OF **32**
for crime overall



Safest London borough for violent crime

Open spaces



1/3rd
green space



100+
parks



21 miles
of river frontage



23,000
bike journeys per day in the borough
2nd out of 33 in London

But, areas to improve



Maximising prevention opportunities



Reducing health inequalities



Minimising harms and threats to health



Planning for demographic change and promoting independence

Start well

2,935 children in Richmond are living in poverty

36%

young people have tried smoking - the highest rate in England



25%

young people report being drunk in the previous month



19%

young people report having tried cannabis

4th highest rate of hospital admissions for self-harm in 10-24 year-olds in London



Live well

17,000 adults smoke



22,000

people have a common mental disorder, such as depression and anxiety



This is the same as the number of adults with obesity (22,000)



38,000

adults drink alcohol at increasing or higher risk levels



The number of new diagnoses of **gonorrhoea** has tripled since 2011



Age well

13,000 TO **23,400** the projected increase in number of over-75s between 2015 and 2035

57%

of over-75s have three or more long-term conditions (including dementia)



the projected increase in number of over-75s



50% of over-75s live alone



2000

emergency admissions annually are potentially preventable

costing £4.2 million per year

15,800 carers

only a fraction are known to services



Context

- Small public health team; Small grant - £9.76M (2016/17)
- NHS Richmond CCG co-located since 2012
- Integration of health & social care commissioning programmes
- Outcomes based commissioning approach – physical and mental health

Creating a Leadership Narrative

London Borough of Richmond upon Thames
Promoting wellbeing and independence – a
Framework for Prevention
2015-2018



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London Borough of
Richmond upon Thames
**Annual Report of the
Director of Public Health 2016**

Prevention:

Redressing the Balance in a Time of Austerity

London Borough of
Richmond upon Thames

Joint Health and Wellbeing Strategy 2016-21

Cross Councillor / Health & Wellbeing Board

Place, community and individual solutions require a **partnership approach**, officers and councillors from:

- Social Care, Public Health & Housing
- Environment and Communities - parks, traffic and transport
- Culture, Arts and Sports

Themes emerging:

- Creating the right place for healthy choices and addressing barriers to existing assets
- Utilising social networks, e.g. Village Planning
- Positively reframing wellbeing activities
- Sustainable approaches- combined efforts to deliver over the longer term



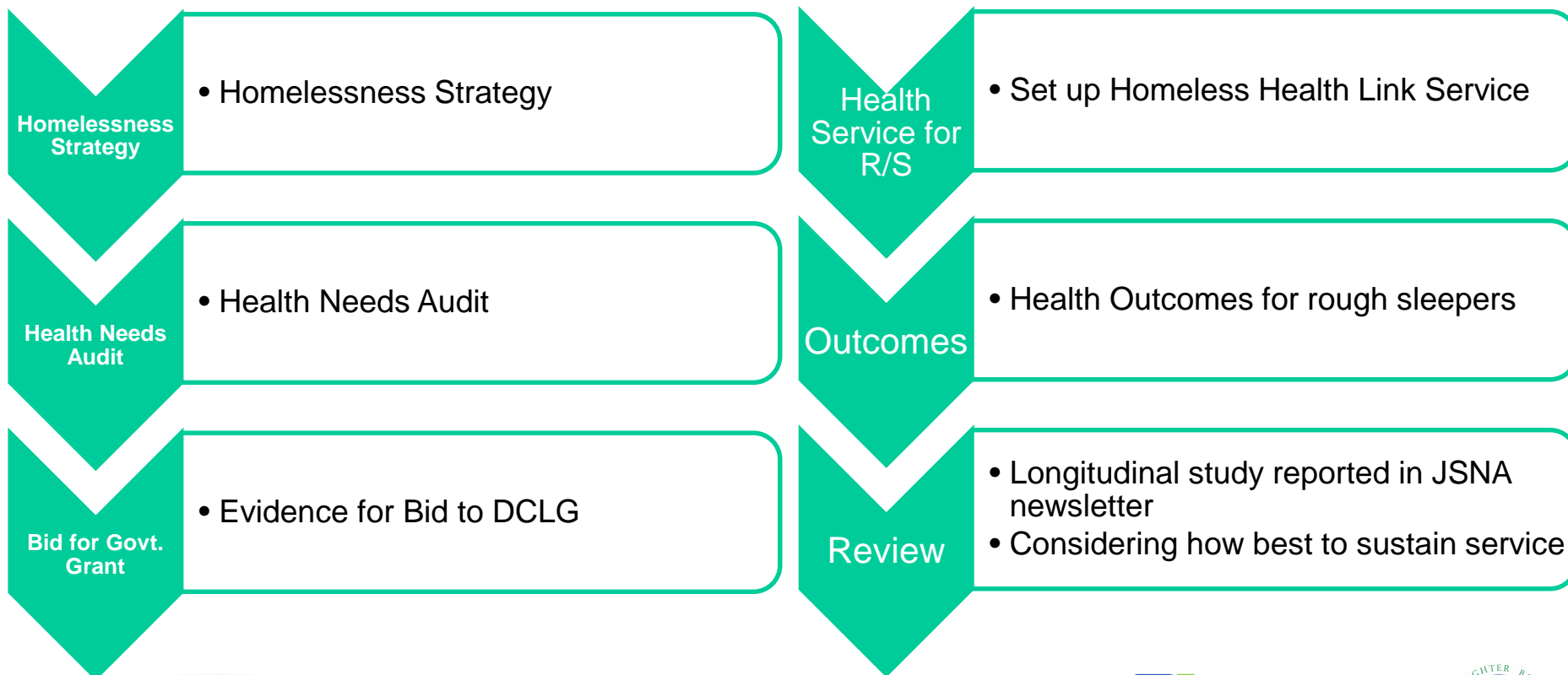
A Whole-Systems Approach to Self-Care



Developing better joint working

- Joint working developed through collaborative approach on number of work streams
 - Housing Strategy 2013-2017
 - Prevention Strategy
 - Mental Health information sharing protocols
 - Housing contribution to annual Public Health report
 - Housing contributions to JSNA Newsletter

How joint working between public health and housing on rough sleeping has led to real outcomes...



Homelessness Strategy 2012 - 2016

■ 2012 – 2016 Homelessness Strategy

- Emerging themes
- Multi disciplinary steering group
- Engagement between Public Health and Housing
- Led to Discussion on rough sleeping and health - what don't we know?

Homelessness Health

- Homelessness Health Needs Assessment (HNA)
- Local Health Findings
 - Mental health
 - Women
 - GPs / Secondary MH services
- Bidding for funding (homeless health link service)

How the Health Needs Assessment work carried out by Public Health assisted our bid

- Evidence of Need criteria
 - Requirement to demonstrate scale and nature of need
 - HNA – data on GP / Dentistry access
 - HNA – data – mental health need
 - HNA – data – complex needs, drugs and alcohol.
 - Ahead of the field – Pathway recommendation

Use of HNA for ...

- *Demonstrating Joint working* - HNA demonstrates existing joint working between housing, health and commissioners.
- *Benchmarking* - HNA useful for benchmarking and realistic target setting for bid targets.
- *Context for thinking around 'Innovation' criteria* – role of HNA as context in developing TiC approach.

Current outcomes of Homeless Health Link service across the 5 Boroughs

Up to July 2016..

- 120 GP registrations
- 40 clients supported to access dentists
- 20 clients supported to access podiatry
- 132 clients supported to engage with secondary mental health services

Amongst clients using the health service between April 2015 and August 2016 we have measured a..

- 56% reduction in A&E usage
- 51% reduction in use of ambulances
- 62% reduction in hospital admissions



Useful links

- **APHR 2016/17**
- [http://www.richmond.gov.uk/annual public health report](http://www.richmond.gov.uk/annual_public_health_report)
- **JSNA**
<http://www.richmond.gov.uk/jsna>
- **HWB Strategy**
- [http://www.richmond.gov.uk/joint health and wellbeing strategy](http://www.richmond.gov.uk/joint_health_and_wellbeing_strategy)

Contacts & Acknowledgements

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