

## **LONDON BOROUGH OF WALTHAM FOREST**

| Meeting / Date                    | Cabinet<br>11 January 2024   |            |
|-----------------------------------|--|------------|
| Report Title                      | Building a Fairer and Healthier Waltham Forest: our response to the Marmot recommendations                   |            |
| Cabinet Portfolio                 | Councillor Naheed<br>Asghar, Portfolio Lead<br>Member for Health and<br>Wellbeing                            | 11) Anglas |
| Report Author/<br>Contact details | Joe McDonnell, Director of Public Health  Joe.McDonnell@walthamforest.gov.uk                                 |            |
|                                   | Moushumi Bhadra, Assistant Director of Strategy and Design   |            |
|                                   | Moushumi.Bhadra@walthamforest.gov.uk   |            |
|                                   | Rebecca Teers, Health Equity Programme Manager Rebecca.Teers@walthamforest.gov.uk                            |            |
| Wards affected                    | ALL  |            |
| Public Access                     | OPEN   |            |
| Appendices                        | Appendix A: Building a Fairer and Healthier Waltham Forest: our response to the Marmot recommendations DRAFT |            |
|                                   | Appendix B: EA Screening   |            |

### 1. SUMMARY

- 1.1 The purpose of this paper is to introduce our 'Building a Fairer and Healthier Waltham Forest' report, setting out our formal response to the recommendations from the Institute of Health Equity's 'A Fairer and Healthier Waltham Forest' (Marmot) report.
- 1.2 The Marmot report provided a robust evidence base on the scale of health inequalities in Waltham Forest. Over the last year, we have worked with service leads from across the Council, in alignment with the breadth of Cabinet portfolios, to understand the influence of the Marmot report, capturing the extensive incremental improvements we are making across Council services, and with partners, to improve the health and well-being of our residents.
- 1.3 Building on this, we have committed to taking bolder action in areas where we can have the greatest impact for those who are least likely to



live in good health in our borough. We are committed to going further in tackling poor health outcomes through an unwavering focus on creating fairer work opportunities, healthier homes across all tenures, and building healthier and greener local communities. To achieve our full ambitions, we will work across partners to embed a more collaborative, preventative, and integrated approach to closing the health gap in our communities.

### 2. RECOMMENDATIONS

- 2.1 Cabinet is recommended to:
- 2.1.1 note our commitments and ambitions to address the health inequalities that exist within our borough as set out in our 'Building a Fairer and Healthier Waltham Forest' report included in Appendix A.

### 3. PROPOSALS

## **Background Information**

- 3.1 The Institute of Health Equity's Marmot report provided a robust evidence base on the social and environmental conditions in which Waltham Forest residents are born, grow, live, work and age. Its findings starkly demonstrated that not all our residents equally benefit from the best of these opportunities or can expect to live a healthy life, and that many experience poorer health outcomes because of their ethnicity, postcode, age, household income, and other wider factors. We saw that women who live in one of our most affluent wards can expect to live nearly eight years longer than women in one of our poorest, that a quarter of our older residents are living in relative poverty and a third of our children are leaving primary school not fully ready for secondary.
- 3.2 Using these findings, the Marmot Institute for Health Equity provided key recommendations, structured around eight broad policy areas (the Marmot Principles), on the actions that we as a Council can take to deliver better health and wellbeing outcomes for our residents. It also set out how we could drive a renewed focus on health in our strategic partnerships with the voluntary and community sector, local businesses, and the wider public sector, including the NHS (for primary care, our trusts, and the integrated care system).
- 3.3 Our 'Building a Fairer and Healthier Waltham Forest' report provides a comprehensive response to the recommendations in the Marmot Commission and demonstrates the transformational impact it has had had on our work. Through engagement with over 100 officers, we have captured the breadth of ambition, commitment and activity that exists across the Council and how we are driving action across Council services to build a fairer borough for our residents.



- 3.4 In our report we set out some of the tactical improvements we are making to better strengthen a focus on health outcomes in our work, and where we are taking collective action with our partners in line with the eight Marmot Principles to improve the conditions in which people are born, live, grow and work to drive better health outcomes for our residents:
  - i. Give every child the best start in life
  - ii. Enable all children, young people & adults to maximise their capabilities & have control over their lives
  - iii. Create fair employment & good work for all
  - iv. Ensure a healthy standard of living for all
  - v. Create & develop healthy & sustainable places & communities
  - vi. Strengthen the role & impact of ill-health prevention
  - vii. Tackle discrimination, racism & their outcomes
  - viii. Pursue environmental sustainability & health equity together
- 3.4.1 As a Council it is our mission to deliver lasting change that will tackle inequalities in health and enable all our residents to reach their full potential and enjoy a good quality of life. We will work tirelessly alongside our partners so that all our residents can access secure homes, eat nutritious food, receive good quality education and learning, and find meaningful work that meets their needs. They must feel supported to participate within their local community, and experience the benefits of safe, green spaces and clean air.
- 3.4.2 The Marmot commission has already influenced some of our most ambitious work to focus on early intervention and prevention, and making change for residents. Key examples of this include:
  - A targeted focus on income maximisation and increasing financial resilience of residents living in the greatest hardship, through the £2m Families in Housing Need programme and our new Housing Sustainment team.
  - Increasing resident digital skills, connectivity, and online access through our Let's Get Digital programme, a pillar of our Digital Inclusion Strategy
  - Linking residents with preventative support and building confidence to access and navigate holistic local services and advice through our Family Hub Outreach and Community Drop-In services.
  - Working with our VCS to build a stronger, more impactful sector to take collaborative action to improve the health for residents living in deprivation Through our Voluntary and Community Sector strategy, we are creating more joined-up relationships, and strengthening existing initiatives such as our Community Living Rooms and Community Chest fund, for those in greatest need.

### **ACCELERATING ACTION**



- 3.4.3 We are committed to using the Marmot commission as a driver of radical change. We describe three 'accelerator' areas which illustrate the Marmot principles in action, driving transformational action across Council services that have the potential to achieve the best outcomes for our residents, particularly those who experience the poorest health outcomes
- 3.4.4 Using the Marmot evidence to identify key cohorts and co-producing our interventions with Council services and VCS partners, our accelerator areas harness the collective capability of all directorates to respond to some of the immediate challenges facing local people.
- 3.4.5 Our accelerator areas are:

## 1) GOOD WORK, BETTER HEALTH

Helping residents who are furthest from secure employment to find and retain good quality and flexible jobs that meet their needs

- Driving up workplace conditions for residents with disabilities and long-term health condition, to improve access and retention of flexible decent work
- Creating inclusive opportunities for South Asian women to overcome barriers to employment and access to entrepreneurial activities

## 2) HEALTHIER HOMES

Securing a safe, decent, and warm home as foundational to a good life for everyone in Waltham Forest

- A healthier and fairer deal for residents living in the private-rented sector
- High-quality housing for older people that meets their needs as their circumstances change

### 3) GREENER AND HEALTHIER PLACES

Sustainable and holistic approaches to resident health and wellbeing, including access to nutritional and affordable food, green and blue spaces, and recreational and leisure activities

- Healthy and sustainable food within easier reach for those experiencing food insecurity
- Increasing access to green spaces and recreation for our asylumseeker and refugee communities, and those living the south of the borough
- 3.4.6 We recognise that achieving the ambitions we set out in our 'Building a Fairer and Healthier Waltham Forest' report will take time. These accelerator projects are a first step in a longer journey, enabling us to capture learning and insight as we evolve and extend our ambitions to other critical areas.

EMBEDDING HEALTH EQUITY AT THE HEART OF ALL WE DO



- 3.5 Every part of the Council has a role in delivering our shared mission of building a fairer and healthier borough. Delivery of our response would sit within our new, proposed, Stronger Communities Directorate which will be a key enabler for driving our agenda of more integrated, cross-Council action firmly focused on prevention.
- 3.6 We will equip our staff with the skills and knowledge they need to design and deliver services with the health of our residents at the fore, providing tools and guidance to ensure health equity is explicitly and systematically considered in all new programmes, strategies, and approaches. By embedding a commitment to improving health at the core of our cross-cutting strategies and approaches, we will unite staff and partners around this common purpose.
- 3.7 To drive delivery, track progress and monitor impact, we are developing a clear action plan and framework of performance metrics across each of the accelerator areas, allowing us to review and adapt our approach.

# INFLUENCING WIDER CHANGE: OUR KINGS FUND PARTNERSHIP

- 3.8 In developing our response to the Marmot commission, we brought in an independent delivery partner, the King's Fund, to work with us as a Council on targeting our action on local health determinants, and how we can drive more influential change in advancing these priorities through our partnerships.
- 3.9 The Kings Fund are facilitating a series of stakeholder engagement conversations with senior representatives from the Council, health, and VCS partners, to assess the maturity of our strategic partnership and assess the opportunities and challenges for more local integrated working that improves population health.
- 3.10 In line with their findings, they will host a series of workshops, bringing together partners to consider how we can focus our action on more integrated approach to prevention at a place-based level. Our longer-term ambition for our work with the King's Fund is to co-design and co-deliver practical pilot projects to deliver more positive health outcomes for our residents.
- 3.11 As part of this work, we will develop a Health Equity dashboard with clear performance metrics across each of the accelerator areas that will enable us to better hold ourselves to account as a system for our collective action on health inequalities.

### 4. OPTIONS & ALTERNATIVES CONSIDERED

4.1 The Council is committed to improving health inequalities across Waltham Forest, informed by the findings and recommendations set out in the Marmot report. This report was considered to be the most effective mechanism for setting out our response.



# 5. COUNCIL STRATEGIC PRIORITIES (AND OTHER NATIONAL OR LOCAL POLICIES OR STRATEGIES)

5.1 Reducing health inequalities is a key priority for the Council. We will come together with our partners around shared missions to address the factors that impact poor health outcomes. We will embed health equity within our core Council strategies and programmes, cutting across all Council services and driving the change required to have a transformational impact on the health and well-being of all our residents.

### 6. CONSULTATION

- 6.1 The development of our Marmot response has been informed by extensive engagement and buy-in from officers, members, and the VCS. The Lead Member for Health, Cllr Asghar, and the Cabinet Commissioner for Health Inequalities, Cllr Deakin, have closely steered our Marmot response, working with members to ensure good alignment with other relevant Cabinet portfolios. The Marmot response was a standing item at Health Scrutiny Committee.
- 6.2 Health and care partners have been consulted via the Health and Wellbeing Board and the Waltham Forest Health and Care Partnership. They have committed resource and time to engage in our King's Fund partnership.
- 6.3 VCS partners have shaped the development of the accelerator areas continue to work alongside us to consider how we can create a stronger, more impactful response for residents most exposed to health inequalities.

### 7. IMPLICATIONS

## 7.1 Finance, Value for Money and Risk

- 7.1.1 There are no direct financial implications of the recommendations in the report to note the council's ambition to address health inequalities in the borough.
- 7.1.2 The report provides details of new work, in progress or planned, that the Council is taking to challenge health inequalities. Many of the activities described within the Roadmap will have resource implications. However, the responsibility for delivering and resourcing these programmes and activities will be funded from the existing budgets and governance frameworks of each service area.

## 7.2 Legal

7.2.1 There are no legal implications as the report describes existing work that is already in progress or planned within Council Services.

## 7.3 Equalities and Diversity



- 7.3.1 The equality impact screening exercise determined there was extensive potential for positive impact on equality, and no negative impact. Our report demonstrates how we are centring our commitment to addressing health inequality across all our work, from early years support through education to employment, housing, economic development and community infrastructure, and in the neighbourhoods in which people live and grow.
- 7.4 Sustainability (including climate change, health, crime and disorder)
- 7.4.1 The report describes the breadth of transformative work across the Council to tackle the social, economic and environmental factors that shape **health** outcomes, from early years through education to employment, housing, economic development and the places in which people live and grow. While many of the activities described are new, and are shaped and strengthened by the Marmot recommendations, governance for this work sits within the responsible service areas.
- 7.4.2 Tackling **climate change** and health inequalities together is one of our key Principle and accelerator areas. Through a comprehensive programme of work we are taking action to protect residents from our most deprived communities who face the greatest harm from the climate emergency. From targeting our retrofitting programme to those on the lowest incomes and building an ambitious cross-sector food partnership to tackle food insecurity, through to increasing access to green spaces, active travel and physical activity.
- 7.4.3 Taking a preventative approach to reducing **crime** and the fear of crime has health benefits for victims and offenders, and it is our poorest residents who benefit most. We are working with partners to ensure the safety of our communities most affected by crime, including prioritising the needs of women and girls, taking action to tackle drugs and alcohol and the harm they cause, and intervening early to support young people most at risk of criminal involvement.
- 7.5 Council Infrastructure
- 7.5.1 There are no implications for council infrastructure.

BACKGROUND INFORMATION (as defined by Local Government (Access to Information) Act 1985)

None