

London Association of Directors of Public Health

Priorities for Collaboration:

September 2018 to March 2020

Improving and protecting the health of Londoners

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Welcome

Dear colleague

We are delighted to share with you our latest priorities for collaboration. Over the last five years, London DsPH and their teams have built a successful partnership across our local authorities and with regional bodies, enhancing the ability of local places to improve and protect the health of their populations. Our collaborative work to March 2020 will build on these <u>achievements</u>. We welcome new Directors and Consultants appointed in the last year, who join us in carrying on this vital work, and recognise the contributions of colleagues who have recently moved on or retired.

It is quite simply unfair that Londoners live a shorter and less healthy life than those living in other parts of the country, and unfair that within London, many of our residents have lower life expectancy and less happiness than others. Prevention and early intervention can narrow the gap. Working together, and with our partners, we are rallying different parts of the system to reduce these inequalities.

But our work together is a small part of the picture; every day across London's 33 local areas, public health teams with their council colleagues and local stakeholders continue vitally important work to improve and protect population health based on the needs and priorities of local communities.

In this document we have set out where we will focus collaborative efforts to March 2020, while continuing to respond to urgent and emerging issues. We look forward to working with you to achieve them.



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About us

Background and History

The Association of Directors of Public Health (ADPH) for London represents Directors of Public Health in London's 33 local authorities, supporting them to improve and protect the health of their local populations. Formed shortly before the transition of public health services from the NHS to local authorities in 2013, ADPH London is the regional network of the <u>Association of Directors of Public Health (ADPH)</u> in the UK and a key part of the wider health and care system in London.

Directors of public health in the UK have a long history of working together. ADPH UK can trace its origins to as far back as 1856, when the Metropolitan Association of Medical Officers of Health was formed. During the period from the establishment of Strategic Health Authorities (SHAs) in 2002 to the transfer of public health to local government in 2013, and to the present day, DsPH in London have worked together to improve and protect health in our global city.

Purpose and Principles for Working Together

Through ADPH London, DsPH work together to address issues which can either only be successfully tackled on a pan-London basis or which enhance the ability of local authorities to meet their responsibilities locally, for example through delivering efficiencies, sharing of best practice, reducing duplication, and improving coordination of related work.

Priorities for joint work are decided based on their impact for London, added-value, and timeliness (see diagram on next page).

Organisation

The group is led by a Chair and three Vice-Chairs, elected by their peers. Specific areas of leadership and responsibility are distributed across the membership. All substantive London local authority DsPH are invited to be members, as well as those DsPH that are interim on a long-term basis. Local teams, in particular Consultants in Public Health and assistant/deputy DsPH, also play an important role in the work of the Association.

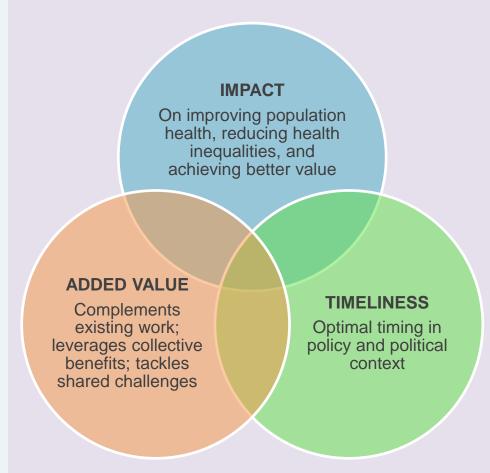
The ADPH London programme is supported by a small team hosted by Haringey Council on behalf of the boroughs and working closely with London Councils and the wider public health system, including Public Health England, NHS England and the GLA. Delivery of the programme is often supported by staff seconded to work on specific workstreams, including trainees on the Public Health Specialty Training Programme.

Further information can be found in our **Terms of Reference**.

ADPH LONDON CORE PURPOSE

- 1. Pan-London public health issues
- 2. Problem solving and tackling emerging challenges
- 3. Strengthen the profile of public health in London
- 4. Expert voice on public health issues
- 5. Improved decision making through shared information
- 6. Benchmarking
- 7. Mutual professional support

OUR PRINCIPLES FOR COLLABORATING



These principles are considered alongside capability and capacity to deliver, affordability, return on investment, evidence of best practice and achievability.

ADPH London Highlights and Achievements since 2013

2013-14

2014-15

2015-16

Supporting the establishment of public health teams in the boroughs

London HIV needs assessment completed

Scoping of public health local government workforce development priorities with PHE

Launch of Practitioner Registration Pilot Scheme in North East & Central London

Establishment of current ADPH London network and first staff appointment

Launch of 3 year London HIV Prevention Programme

Launch of London Local Government Public Health Workforce Development Programme, with PHE and HEE

Review of Integrated Tariff for Sexual Health

Sector led improvement thematic review on smoking and tobacco

First network election for Chair and Vice Chairs

London boroughs successfully negotiated more equitable funding for health visiting

Sector led improvement thematic review on Childhood Obesity for 33 boroughs.

Development of London Digital Mental Wellbeing programme, across 15 boroughs and 32 CCGs

'Skills for Systems Leadership' and 'Leading in the Local System' development programmes delivered

Workforce development included Masterclasses in Public Health and Influencing in a Political Environment, Commissioning skills

External Context

 Health & Social Care Act implemented, public health transition

- London Health Commission
- Better Health for London report published
- London Health and Care Collaboration Agreement
- Healthy London Partnership launched
- Transfer of 0-5 health visiting services
- £200m in year reduction to public health grant

External context

ADPH London Highlights and Achievements since 2013

2016-17

2017-18

Peer workshops on 0-5 service transformation and workforce planning

Review of Sector Led Improvement approach

Childhood obesity programme launched, including Great Weight Debate, engaging residents in all boroughs

Future Drivers of the Health of Londoners webinars held jointly with PHE London

DPH peer to peer reflection pilot completed

Agreement to develop London Smoking Cessation Transformation Programme for 30 LAs

Data visualisation training, coaching for Consultants and Specialists, procurement workshops

Joint advocacy for Air Quality with London Environment Directors Network

- London Health and Care Devolution programme established
- Development and launch of the Academy of Public Health for London, Kent, Surrey, Sussex
- New Mayor of London elected, EU referendum

Two year extension to London's HIV Prevention programme, LGC Award for Campaign of the Year and launch of Fast Track Cities

Completion of London Sexual Health Transformation Programme and MJ award

Work with NHS partners to scale up Making Every Contact Count (MECC) across the London health and care system

Childhood Obesity master-classes held, 19 boroughs working towards local Sugar Declaration

Co-creation of London Health Board's 'Thrive' initiative, launched in June 2017.

With PHE, production of a Future Scenarios card 'game' to inform local strategic planning for Public Health

Mayor of London announces intention to ban advertising of junk food on TfL network, which we have been lobbying for

- · General Election, EU exit process triggered
- Major incidents in Manchester, Westminster, Southwark, Islington and Kensington & Chelsea
- New London Health & Care Strategic Partnership launched
- Consultation on London Health Inequalities Strategy

Current and Future Context (1)

System and organisational context

Recent years have been characterised by significant change, challenges and opportunity, both in the national and London system. These are shared issues, but will play out locally in different ways:

- Significant **funding and service demand** pressures, including the reduction of the public health grant in December 2015. The NHS received a £20bn 'birthday' present in June 2018; settlements for the wider public sector will be announced as part of the CSR in autumn 2018.
- Development of five year <u>Sustainability and Transformation Plans (STPs)</u>. This presents opportunities to influence the NHS to strengthen its role in preventing ill-health, and taking population health approaches.
- Opportunities for **devolution** in health and care across London, following the signing of the <u>London Health & Care Devolution Agreement</u> in December 2015. DsPH are co-leading the Prevention Programme and there are opportunities around Integration and Estates.
- Government plans to introduce **75% (previously 100%) business rates retention** by local authorities in 2020. Re-design of the funding system must be informed by consideration of population need and how this varies between places. The future status of the **ring-fence** on the public health grant is TBC. London boroughs are considering applying to pilot BRR from 2019.
- The Mayor of London is half-way through his 4 year term, about to introduce refreshed **London Health Inequalities Strategy** and has demonstrating willingness to take action on health e.g. proposed ban on junk food advertising across TfL.
- National election in May 2017, with a new **Government** formed following the EU referendum bringing changes in national policy direction. It is a crowded space in which to make the case for public health, although there are some recent positives e.g. the second version of the Child Obesity Strategy.
- Major incidents in 2017 in Manchester, Westminster, Southwark, Kensington & Chelsea, and in Islington learning and reflection held on role of **mutual aid**.
- Public health teams are applying their skills and resources to economic development as a means to improving health and wellbeing. For example in developing inclusive growth agendas, or adopting a 'health in all policies' approach
- Local council elections in London held in May 2018 new administrations locally, and a new London Councils Executive

Current and Future Context (2)

Factors driving the future health of Londoners

As we described in our Future Drivers of the Health of Londoners report with PHE in 2017, the health of Londoners is a precious asset, which has underpinned the success and vibrancy of London over many years. As London continues to grow and evolve, anticipating change is more important than ever. Societal, technological and system changes provide some exciting opportunities to improve health and tackle health inequalities. New technologies, public sector transformation, place based approaches and new relationships with and between citizens and communities all have a key role to play. There are also risks to be mitigated. Responding positively will, however, be challenging when there are immediate pressures arising from increasing demands on services, budget reductions, changing populations and communities, and a rapid pace of technological change. You can read more about what London DsPH, external thought-leaders and our stakeholders think will influence Londoners' health over the next few years here.

ADPH Narrative on the UK Public Health System

ADPH published their <u>narrative</u> on the status of the UK public health system in November 2017. Key messages:

- 1. A whole system approach and concerted action to address the wider determinants of health is needed to make sustained progress in improving population health outcomes.
- 2. Directors of Public Health should continue to be recognised as **collaborative system leaders** with a focus on integration and prevention and working across organisational boundaries.
- 3. There needs to be a shift across the system **towards prevention** of ill-health and **tackling health inequality**.
- 4. Integration of services needs to extend beyond the NHS and social care to the wider range of services engaging with the population, **taking a place-based approach** and working collaboratively to ensure people lead healthy and fulfilling lives.
- 5. A fit for purpose **workforce**, funding aligned with population need, a strong **evidence base** and good quality **data** are key **enablers** of the public health system.

"The scale of the challenge means no one part of the system can make sustained progress on its own; a whole system approach is needed." (ADPH, 2017)

Priorities and Aims for Collaboration

September 2018 to March 2020						
Membership and peer support						
MEMBERSHIP & PEER SUPPORT	Provide a professional, valued and trusted peer support network for and support problem solving and improvement					

Shared agendas

Provide strategic leadership and advocacy at a London and national level for addressing the negative impacts of air pollution on **AIR QUALITY**

Londoners' health and environment

Support boroughs and partners to establish a whole-systems approach to reducing childhood obesity in London

CHILDHOOD OBESITY CHILDREN AND YOUNG

Londoners

PEOPLE

HEALTH IN ALL POLICIES

MENTAL HEALTH AND

WELLBEING

SEXUAL HEALTH

SMOKING & TOBACCO

SECTOR LED

IMPROVEMENT

& TRANSFORMATION

WORKFORCE

COMMUNICATIONS

PARTNERSHIPS

GOVERNANCE &

MANAGEMENT

Provide strategic leadership and advocacy for children and young people's health in London, and work in partnership to

address pan-London challenges to giving children and young people the best start in life

Develop Health in All Policies, by capturing, supporting, developing approaches at national, pan-London and borough level

Provide strategic leadership, support and advocacy for pan-London initiatives to maintain and improve the mental health of

Provide strategic leadership and advocacy for better sexual health and support boroughs to transform commissioning

Support boroughs to transform and improve access to stop smoking support, delivering improved health outcomes for

Shape and build relationships which deliver systems leadership and efficient use of effort in protecting and improving public

System improvement and development

Working with our partners, to build the capacity and capability of the public health system in London

business rates retention, system transformation in the form of devolution and STPs

Ensure a financially sustainable and effectively managed work programme

all London borough DsPH to share ideas and good practice

Further develop sector-led improvement for public health in London, taking collective responsibility for the continual improvement of local public health outcomes

residents, and savings for the public sector

PUBLIC SECTOR REFORM

Support DsPH to meet their local responsibilities in the context of reduced resources, changes to council funding through

Infrastructure / Enablers

reputation for adding value and increasing system capacity

PROG. DEVELOPMENT & Ensure the network and programme continues to be well led, makes sustainable use of system assets and maintains its

health in London

Priorities and Aims for Collaboration

September 2018 to March 2020



AGENDAS SHARED

AIR QUALITY

Strategic leadership and advocacy at a London and national level for addressing the negative impacts of air pollution on Londoners' health and environment

MENTAL HEALTH & WELLBEING

Strategic leadership, support and advocacy for pan-London initiatives to maintain and improve the mental health of Londoners

CHILDHOOD OBESITY

Supporting boroughs and partners to establish a wholesystems approach to reducing childhood obesity in London

SEXUAL HEALTH

Strategic leadership and advocacy for better sexual health and support boroughs to transform commissioning

CHILDREN & YOUNG PEOPLE

Strategic leadership and advocacy for children's health in London, and working in partnership to address pan-London challenges

SMOKING & TOBACCO

Supporting boroughs to transform and improve access to stop smoking support, delivering improved health outcomes for residents, and savings

HEALTH IN ALL POLICIES

Developing Health in All Policies, by capturing, supporting, developing approaches at national, pan-London and borough level

EMERGING AREAS

Serious Youth Violence

IMPROVING POPULATION HEALTH

REDUCING **HEALTH INEQUALITIES**

ACHIEVING BETTER VALUE

SECTOR LED **IMPROVEMENT**

Developing sector-led improvement for public health in London, and taking collective responsibility for the continual improvement of local public health outcomes

PUBLIC SECTOR REFORM & TRANSFORMATION

Supporting DsPH to meet their local responsibilities in the context of reduced resources. changes to council funding, and system transformation

WORKFORCE DEVELOPMENT

Working with our partners, to build the capacity and capability of the public health system in London

Programme plan and governance

Delivery plan

Supporting our priorities for collaboration is a programme plan (Appendix 1) that sets out how we plan to work together over the next 18 months, and the leadership arrangements to ensure delivery, including the names of sponsoring DPH.

This is not exhaustive; for a full list of where DsPH are working together at a London level please contact the programme office. This will shortly be available on our website.

Leadership

Different DsPH and Consultants take the lead on particular issues or topics. The level of input and nature of the leadership role varies depending on the issue. For example it might involve attending London meetings, chairing project boards, or overseeing consultation responses. A list of the leads is available from the programme office and will shortly be published on our website.

Monitoring progress

Progress is reported to each London Directors of Public Health meeting, held four times a year. It will be reviewed no less than every four months to assess progress, and to consider any changes that need to be made.

Governance

This plan is agreed by Directors of Public Health in line with the ADPH London terms of reference.

Key activity Sept to Dec 2018

The high level programme timelines to March 2020 are set out in Appendix 1. These will be reviewed no less than every four months to reflect any changes agreed by DsPH.

From September to December 2018 inclusive, our focus will be on:

Alcohol Sector Led Improvement Exercise Delivery and Next Steps
Supporting the development of the Mayor's Child Obesity Taskforce, and exploring opportunities to engage with advertising providers on London wide borough approach to match the Mayoral ban on TfL advertising
Securing next phase (2019-22) of the London HIV Prevention Programme
Launching the refreshed Stop Smoking London portal, enhanced behavioural support, and new marketing campaign
Shaping the proposals for the Good Thinking Mental health programme between 2019-21 to ensure best value for boroughs
Development of a Children and Young People's SLI review, to take place in 2019
DPH Peer to Peer Reflection Process

Other deliverables during this time will include:

- Refreshing joint work on air quality (from October)
- Responding to consultations on the Mayor of London Sports Strategy and NHSE London's 'serving the underserved' immunisations strategy
- Scoping collaboration on Serious Youth Violence
- Agreeing next steps on supporting boroughs with Health in All Policies
- Increasing interim programme team capacity



Appendix: Programme Plans

1. Membership and Peer Support

AIM: To provide a professional, valued and trusted peer support network for all London borough DsPH to share ideas and good practice and support problem solving and improvement

	OBJECTIVES	TEAM LEAD (S)	DPH OR CPH LEAD(S)	TIMELINES
1.1	Deliver a planned programme of valuable and high quality member meetings and events	JC, JK	Chair & Vice Chairs	Ongoing: DPH meeting plans reviewed at May 2018 meeting.
1.2	Welcome and induct all new London DsPH, and support departing DsPH and their next in lines	JC, JK	Chair & Vice Chairs	Ongoing: as DsPH start and leave
1.3	Deliver a DPH peer to peer reflective practice cycle for all boroughs	EC	PB, SW	July - Dec 2018
1.4	Deepen understanding of individual members, their expertise and contributions	JC	Chair & Vice Chairs	TBC
1.5	Signpost members to sources of external support offers including from ADPH UK	JC, JK, EC	Chair & Vice Chairs	Ongoing: summary map to be produced in autumn 2018

2. Infrastructure / Enablers

AIMS:

- **Programme Development & Communication:** To ensure the network and programme continues to be well led, makes sustainable use of system assets and maintains its reputation for adding value and increasing system capacity
- Partnerships: To shape and build relationships which deliver systems leadership and efficient use of effort in protecting and improving public health in London
- Governance & Management: To ensure a financially sustainable and effectively managed work programme

	OBJECTIVES	TEAM LEAD	DPH OR CPH LEAD	TIMELINES
2.1	Plan and Deliver Chair and Vice-Chair elections to take place in 2019 and ensure effective handover and induction	JC	Chair & VCs	Nov 2018 – Mar 2020
2.2	Maintain, review and strengthen an effective system of DPH and/or Consultant leadership roles and representation	JC, JK	All	Ongoing 2019: review/refresh
2.3	Plan, scope and deliver next steps for increasing involvement of ADs/Consultants , including in leadership roles	ТВС	ТВС	Nov 2018 - Feb 2019
2.4	Maintain a strong system for internal communication within the network and explore opportunities to improve efficiency of communication	JC, JK	All	Ongoing
2.5	Review, develop and implement external communications strategy	TBC	Chair & VCs	2019 onwards
2.6	Map officer networks and review how to support and maximise	TBC	Chair & VCs	2019
2.7	Increase public health registrar awareness and involvement, and explore potential to be a training location	ТВС	Chair & VCs	2019
2.8	Maintain and strengthen relationship with London strategic partners : PHE, NHSE London, London Councils, CELC Health lead, GLA, LGA, London Clinical Senate, London Health & Care Strategic Partnership Board, London Prevention Partnership Board, Healthy London Partnership	All	Chair & VCs and leads as appropriate	Ongoing
2.9	Explore links with London academia	TBC	TBC	TBC - 2019
2.10	Strengthen links with ADPH UK and other geographical DPH networks	All	Chair & VCs, RF	TBC - 2019
2.11	Explore links with other London public sector partnerships e.g. London Housing Directors	TBC	TBC	TBC - 2019
2.12	Maintain a strong, successful and continually improving programme team	JC	Chair, VCs, Haringey DPH	Ongoing
2.13	Annual Review of Terms of Reference	JC	Chair & VCs	May-19
2.14	Maintain funding of the programme by 100% boroughs in 2018/19 and 2019/20	JC	All	
2.15	Explore non-subscription sources of funding and Continue to leverage system resources	JC	Chair & VCs	2019

3. Air Quality

AIM: To provide strategic leadership and advocacy at a London and national level for addressing the negative impacts of air pollution on Londoners health and environment

	OBJECTIVES	TEAM LEAD	DPH OR CPH LEAD	TIMELINES
POL	ICY/LOBBYING:			
3.1	 Objective to be reworded. Two objectives proposed in July were: Respond to the final stages of the Mayor's Air Quality Strategy consultation. – This was completed in the Environment Strategy response in the summer. Respond to Defra Clean Air Strategy consultation (either a London DPH response or contribute to national). This closed in August 2018 so should not be included in Sept 2018-Mar 2020 plans. 	YC	HAS	
SUP	PORT TO BOROUGHS:			
3.2	Finalise and publish the resource pack for London DsPH on air quality	YC	HAS	
3.3	Identify opportunities to work more closely with the GLA and PHE to support local initiatives and cross borough working and learning	YC	HAS	TBC - All timelines to be
3.4	Maintain DPH lead(s) expertise to act as a point of contact for DsPH to approach	YC	HAS	discussed in the autumn
INFL	UENCE STAKEHOLDERS:			
3.5	Work with partners to map related work on air quality, in particular around communications with the public, in order to reduce duplication and amplify shared objectives.	YC	HAS	
3.6	Work with NHS partners including the London Clinical Senate to support their efforts to improve air quality, in support of Sustainability and Transformation Plans	YC	HAS	
3.7	Influence PHE review group on review of evidence.	YC	HAS	

4. Children and Young People's Health

AIM: To provide strategic leadership and advocacy for children's health in London, and work in partnership to address pan-London challenges to giving children and young people the best start in life

	OBJECTIVES	TEAM LEAD	DPH OR CPH LEAD	TIMELINES
Sect	or led improvement			
4.1	Commission the development and piloting of a CYP SLI framework using London Councils funding from NHSE in preparation for conducting a thematic review. Work in collaboration with ALDCS to ensure DsCS are engaged, and bought into, CYP SLI work. Ensure appropriate stakeholder engagement including ADPH UK and LA CExs	YC	DZ	Apr-19
4.2	Deliver a thematic review for CYP following the successful piloting	YC	DZ	TBC
	ride coordinated support to the system, linking work streams and partner boards opropriate	YC	DZ, NL, MC, JD, KW, tbc	ongoing
4.3	Manage and support the CYP Public Health Network, delivering quarterly meetings and ensuring it is a valuable and collaborative platform	YC	KW	Ongoing
4.4	Represent Public Health on the London Safeguarding Children's Board (LSCB), building links with DsCS and ensure PH input into relevant safeguarding issues	YC	KW	Ongoing
4.5	Continue to support CHIS board, Healthy Schools London and Healthy Early Years London	YC	MC	Ongoing
4.6	Represent public health on the Maternity Transformation Board	YC	tbc	tbc
4.7	Explore pan London work on CYP oral health in partnership with PHE London and HLP	YC	DZ	
Advo	ocate for CYP in London's mental health and wellbeing agenda	YC	DZ	Ongoing
4.8	Support Thrive LDN and Good Thinking in targeted CYP work	YC	DZ	Ongoing
4.9	Scope out public health's role in supporting the London Children's Safeguarding Board	YC	KW	Aug - Dec 18

5. Child Obesity

AIM: To support boroughs and partners to establish a wholesystems approach to reducing childhood obesity in London

	OBJECTIVES	TEAM LEAD	DPH OR CPH LEAD	TIMELINES
5.1	Support the development and delivery of the London Childhood Obesity Taskforce	EC	DR, SW	Ongoing
5.2	In partnership with PHE London, deliver the London Obesity Leads Network to support sharing of best practice and peer learning	EC	DR, SW	Ongoing
5.3	Commission an organisation to support borough uptake of the Local Government Declaration and Sugar Smart campaigns	EC	DR, SW	Aug 18 - June 19
5.4	Support the implementation of related devolution commitments (sugar levy, advertising and superzones) and ensure boroughs are engaged and their needs are represented.	EC	DR, SW	Ongoing
5.5	Explore opportunities to engage with advertising providers on London wide borough approach to match the Mayoral ban on TfL advertising	EC	DR, SW	Aug - Dec 18
5.6	Ensure opportunities from Mayoral and Government commitments are maximised, supporting ADPH UK as appropriate	EC	DR, SW	Ongoing
5.7	Develop an overview of physical activity interventions available to boroughs and provide case studies to facilitate shared learning.	London Sport	DR, SW	Aug - Dec 18
5.8	Work with London partners (PHE London, London Councils, GLA and HLP) to influence the strategic direction of the Strategic Partnership Board's priority on child obesity.	EC	DR, SW	Ongoing

6. Health In All Policies

AIM: To develop Health in All Policies, by capturing, supporting, developing approaches at national, pan-London and borough level.

	OBJECTIVES	TEAM LEAD (S)	DPH OR CPH LEAD(S)	TIMELINES
6.1	Respond to the last of the Mayoral Strategy Consultations and support London system responses	YC	GS, MS	London Sport Strategy due 15 Oct 2018
6.2	Map London and local work on Health in All Policies to determine potential for shared work	YC	ВК	August - Nov 2018
6.3	Develop links with the Healthy Place Network, identifying overlapping priorities and opportunities for shared work	YC	HAS, JL, FW	Ongoing
6.4	Smoke free Housing – co-ordinate London boroughs' collaboration in a national group exploring this new policy area	TBC	SB (TBC)	To scope after Nov 18

7. Mental Health & Wellbeing

AIM: To provide strategic leadership, support and advocacy for pan London initiatives to maintain and improve the mental health of Londoners

	OBJECTIVES	TEAM LEAD (S)	DPH OR CPH LEAD(S)	TIMELINES
7.1	Provide leadership, support and expertise to the Thrive London programme	EC	MS	Ongoing
	Help to shape the future of the Thrive programme and increase opportunities for borough engagement	EC	MS	Ongoing
	Maximise opportunities for DsPH to engage with, and benefit from, Thrive LDN resourcing	EC	MS	Ongoing
7.2	Provide leadership, support and expertise to the roll-out of the Good Thinking programme	EC	IC	Aug 18 - April 19
	Support the development of a business case for Good Thinking for 2018-21	EC	IC	Aug - Dec 18
	Improve DsPH engagement in the future of Good Thinking, through providing a communication link between the Good Thinking team and DsPH	EC	IC	Aug 18 – April 19

8. Smoking Cessation

AIM: To support boroughs to transform and improve access to stop smoking support, delivering improved health outcomes for residents, and savings for the public sector

		OBJECTIVES	TEAM LEAD (S)	DPH OR CPH LEAD(S)	TIMELINES
8	3.1	Commission, pilot and contract manage service suppliers to deliver an integrated London wide Stop Smoking solution. This will include the continuation of enhanced behaviour support and a public user interface currently referred to as the London Stop Smoking Portal	МВ	SB and LSCTP board	By March 2019
8	3.2	Infrastructure / Enabler: Support boroughs to implement best practice locally through the Tobacco Leads network	n/a - via PHE	SB and LSCTP board	Ongoing

9. Sexual Health

AIM: To provide strategic leadership and advocacy for better sexual health in London and support boroughs to transform sexual health commissioning

	OBJECTIVES	TEAM LEAD (S)	DPH OR CPH LEAD(S)	TIMELINES
9.1	To lead the London Sexual Health Programme at City of London, including for the e-service and integrated sexual health tariff	City	PB, JOS	Ongoing
9.2	To lead and steer, as active partners, London's Fast Track Cities programme for HIV, as members of the FTC Leadership Group	PS	JB	Ongoing
9.3	To secure the future of the London HIV Prevention Programme	PS, London Councils	JB	Decision due at Leaders' Committee 9 October '18
9.4	To deliver the next phase of the London HIV Prevention Programme	PS, Lambeth team	JB	Ongoing (programme period 2019-22)
9.5	To provide leadership, support and expertise to new developments, currently including: the implementation of the PREP study/trail for London SH clinics the rollout of the Hepatitis A MSM vaccine across London	City	PB, JOS	Ongoing
9.6	Enabler: Support boroughs to implement best practice locally through the Sexual Health Commissioners network	City	PB, JOS	Ongoing, meetings every four months

10 .Sector Led Improvement

AIM: To further develop sector-led improvement practices for public health in London and take collective responsibility for the continual improvement of local public health outcomes

	OBJECTIVES	TEAM LEAD (S)	DPH OR CPH LEAD(S)	TIMELINES
10.1	Complete alcohol thematic review, delivering a peer review event in Sept 2018, compiling an overview recommendations report by Dec 2018, and reporting to DsPH in Feb 2019	PV, YC, EC	IL	July 18 – Feb 19
10.2	Commission the development of a CYP SLI framework	YC	DZ	July 18 - April 19
10.3	Complete network wide DPH peer to peer programme	EC	PB, SW	July - Dec 18
10.4	Review approach to SLI and develop forward plan, including considering a SLI conference	EC	PB, SW	March – July 19
10.5	Initiate CYP thematic review	YC	DZ	2019 TBC
10.6	Evaluate impact of alcohol thematic review one year on and learnings of 'light touch' pilot	YC, EC	IL	October 2019
10.6	Capture the learnings of 'light touch' pilot	YC, EC	IL	February 19
10.7	Continue to deliver data insight and review process	EC	SB	Sept 18 – April 19

11. Public Service Reform & Transformation

AIM: To support DsPH to meet their local responsibilities in the context of reduced local government resources, changes to council funding through business rates retention, system transformation in the form of devolution and STPs

	OBJECTIVES	TEAM LEAD	DPH OR CPH LEAD	TIMELINES		
Fir	Finance					
11.1	Continue to advocate for a needs based approach to public health funding in London, through the Fair Funding review and Comprehensive Spending Review, and support ADPH UK in making the case for public health funding	JC	PB, MS	Ongoing		
11.2	Work with partners to develop the details of a 100% BRR pilot for London	JC	PB, MS	Sept – Dec 2018		
11.3	With PHE, support new DsPH around reporting on the use of the public health grant	JC	PB, MS	October 2018		
Devolution						
11.4	Working with PHE and London Councils, lead and steer the mobilisation and initial delivery of the prevention devolution workstreams	JC	JB and leads	Sept 2018 - March 2019		
STPs, HCPH, and Population Health						
11.5	Identify opportunities for shared learning on how prevention is delivered as part of STPs	JC	STP DsPH	TBC		
11.6	Support local boroughs and STPs by developing the capacity of the Healthcare Public Health borough Consultant network and using it as an expert reference group	TBC	WM	TBC		
11.7	Linking ADPH London and local authority public health teams into the London wide system for improving population health where there are already structures and working groups for improving outcomes in place – initial focus on improving detection and management of AF and hypertension	TBC	WM	Sept – Dec 2018		
Future Drivers						
11.8	Work with Public Health Academy to review the impact of the Future Drivers of the Health of Londoners project and agree next steps	n/a – PHE/Acade my	VH, RW	TBC 25		

Emerging or ad-hoc areas

- Serious youth violence scoping how DsPH and their teams might work together on this
- Mapping of borough approaches to Health Protection
- Responding to NHSE London Immunisation Strategy