

Residents and Communities Strategy

Barking and Dagenham
2024-2029

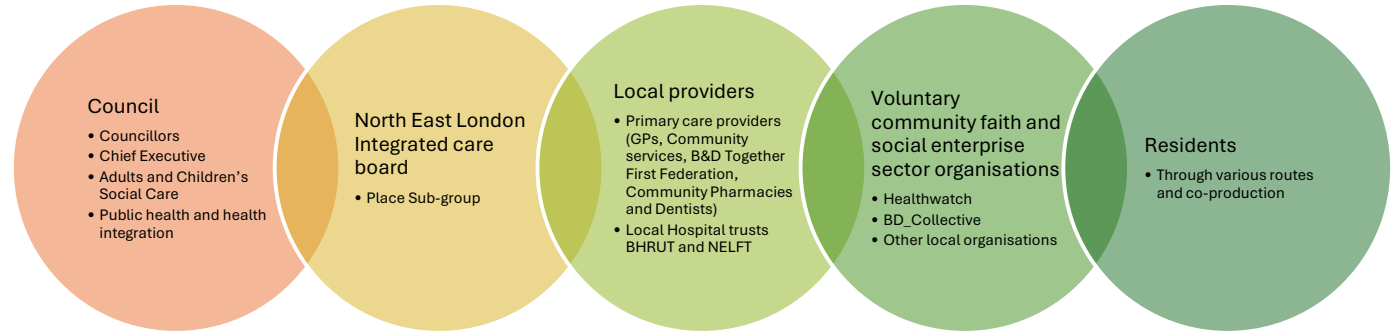
Introduction

The Place Partnership for Barking and Dagenham brings together representatives from a wide range of local organisations which are responsible for delivering health and care services, activities and support with and for Barking and Dagenham residents.

The partners come together through the Barking and Dagenham Committees in Common, which is the collective governance vehicle established by local partner organisations to collaborate on strategic policy matters and oversee joint programmes of work relevant to our local place.

The Residents and Communities Strategy 2024-29 aims to translate the priorities and principles of the Barking and Dagenham Joint Health and Wellbeing Strategy 2023 to 2028 into focused work areas with associated outcomes that are meaningful to residents. The strategy will guide partnership action to address the priorities of 'Living Well' and 'Ageing Well' over the next five years. It has been developed with staff and residents and is about creating **a shared plan** for the future: including what local activities and services need to look like when they are **to meet residents' needs** now and into the future; what support can we offer each other **within our communities**; and **how we can best work together** to ensure everyone has the chance to fulfil hopes and dreams **for a good, long, independent and healthy life**.

The strategy does not include everything that each of the partners does. It includes only things that need us as partners to come together to achieve and so make a big difference for residents.



The context

Barking is a fast-changing borough with a growing population:

- Since 2010, the borough's population has grown by 39,000 (21%), with significant associated increases in demand for services
- The White or White British ethnic group made up 58.3% of the population in 2011, and 44.9% in 2021, which was the largest decrease of any group and demonstrated the increasing ethnic diversity in the borough
- In the 2021 census, 72.1% of Barking and Dagenham residents spoke English as their main language. Both language and cultural behaviours around help-seeking may impact people's ability to seek local support; and around four out of five are estimated to have problems understanding and interpreting health information

Assets and opportunities

We have active and engaged local communities:

- In a series of local conversations with residents, residents were articulate about their hopes, dreams and aspirations. Their first port of call is family, friends, neighbours and local community
- Four out of every five residents surveyed agreed that the local area is “a place where people from different backgrounds get on well together”

It is a time of growth and development in the borough:

- Regeneration is leading to development and housing opportunities, and new businesses are coming into the borough. There are opportunities to shape communities and place; and to create education , employment and training for local residents

Local challenges

Not everyone feels connected and supported:

- Over one in four residents report being lonely all or some of the time (B&D JSNA 2023)
- Access to primary care and education and training were common themes in resident engagement

Residents experience persistently poor healthy life expectancy:

- On average, Barking and Dagenham males born from 2018-2020 can expect to live 58 years in good health and females 60 years in good health, which is significantly lower than London and England averages (JSNA)
- Residents experience some of the highest premature mortality (deaths under age 75) rates in the country; half of which are estimated to be preventable with the right prevention and care (JSNA)

High rates of long-term conditions and obesity:

- Approximately one in three registered patients aged 65+ have one or more long term conditions, and one in five registered patients aged 20-65 have one or more long term conditions. Over a third (36%) increase in common long-term conditions is projected, related to population growth alone in 10 years (21% / 42% in 18-64 / 65+ years) (BHRUT Analysis)
- Nearly one in three adult residents are classified as obese, and childhood obesity is also on the increase (JSNA)

Residents experience high levels of deprivation, further impacted by the cost of living crisis, contributing to health and wellbeing inequalities:

- In the 2021 Census, 46,100 households (62.4%) were deprived in at least one of the four dimensions of deprivation (education, employment, health and housing). This is the highest proportion of deprived households within local authorities in England
- Most residents reside in an environment that will bring them into contact with health hazards of alcohol, tobacco, gambling and fast food more often than the national average. Household access to green space and physical activity across most of the borough is poor (JSNA)
- Healthier environments was a common theme in community engagement

Financial challenges faced by NHS, council, and voluntary, community, faith and social enterprise (VCFSE) sectors provide a challenge to work better together in partnership around the needs of residents:

- It is estimated that the Barking and Dagenham Council's core spending power reduced by £39.5m (16%) in real terms from £245.5m to £206m in 2024-25. This means core spending power per head is now 31% lower than it was in 2010-11 (LBBD Productivity Plan)
- The social sector in Barking and Dagenham is smaller than elsewhere in London, with an annual turnover of £24.5 million. There is evidence to suggest that the social sector in the Borough suffers from a lack of inward investment from external funders, increasing competition for scarce resources (Together We Lead Strategy, BD_Collective)

How the strategy has been developed

Resident engagement (Autumn-Spring 2024):

- 'Best Life' survey conducted with 90 residents across local community hubs, engagement events and online platforms.
- Community Conversation with 57 Residents led by Healthwatch.

Assessment of local needs (Spring 24):

- Insights from key pieces of local work have been collated and used to inform strategy development: Barking and Dagenham Joint Strategic Needs Assessment 2023; relevant insights from NEL ICB and council analysis; Further community insights e.g. Friends and Purpose podcasts (produced by BD Collective); engagement linked to community locality programme, Resident Stories (produced by BD_Collective)

Development Session for the Committees in Common (July 24):

- Priorities and outcomes reviewed and further refined.

Place leadership Consultation (Autumn 23):

- Leaders from organisations across the Place Partnership were interviewed on key needs and priorities for the Residents and Communities Strategy.

Co-production of Outcomes and Priorities (May 24):

- In an engagement event with a mix of frontline and managerial staff and residents across the partnership, the outputs from the engagement and local needs were reviewed and draft outcomes and priorities produced.

One Borough Voice consultation (Autumn 24):

- Public consultation on final draft strategy

Our local vision and priorities

Our vision builds on that of the Barking and Dagenham Joint Health and Wellbeing Strategy 2023-28:

“Residents in Barking and Dagenham will have improved physical and mental health and wellbeing, with a reduction in the gap in health inequalities between Barking and Dagenham residents and people living elsewhere. Our residents will benefit from coproduction and partnerships around their needs and priorities.

They will live in an environment and within communities that enables them to improve their health and wellbeing, living the life they want, and able to access easily the information, advice, activities and support they need to do so.”

We have developed five shared system priorities through which we intend to align local transformational work and delivery:

- 1. Enhanced local community support and connections**
- 2. Access to activities and support at the right place and time**
- 3. Create an environment and opportunities that enable health and wellbeing**
- 4. Promote healthier lifestyles and prevent ill-health and care needs**
- 5. Fair and equitable opportunities for everyone to live well and achieve their potential**

We have developed core ambitions and action workstreams for each priority that will be reflected in our partnership delivery plans. We commit to working to underlying principles across all five that align with the Joint Health and Wellbeing Strategy.

Shared principles

Working closely in partnership including sharing/planning use of financial resources

Co-production and involvement of residents and service users in decision-making

Improving our information sharing and consistency of messaging; aligning data and insights

Promoting innovation and technology capable of providing better outcomes for residents

PRIORITY 1. Enhanced local community support and connections

For residents, knowing you have trust, connection and belonging within your local community has a direct positive impact on your wellbeing and contributes to greater healthy life expectancy. It can mean you are more likely to seek and find support when you need it to help you through challenges. Community organisations play a central role in both bringing together and supporting local communities: many people will turn first to a relative, neighbour, friend or a social sector organisation or place of worship. Many residents also take on direct caring roles for those in their community.

Building a connected, effective community infrastructure – where healthy life expectancy is improved and people live well and independently for longer – takes commitment and discipline by the whole partnership to shift our cultures and ways of working. This involves ensuring: residents are supported to connect with and care for each other; community organisations are strengthened to do what they do best and create effective partnerships with other activities, services and organisations; and opportunities are there for residents to influence the planning and delivery of local activities and services.

What we aspire to achieve for our residents

- 1 a) I have good social connections, community spaces and networks that support my wellbeing and help me live an independent and healthy life
- 1 b) I can influence local decisions around support and services for health and wellbeing, and am confident I am listened to

How we plan to achieve this

- 1 i) Developing a localities neighbourhood working model: Working closer to where people live (through local hubs), supporting development of an active community that takes responsibility for its own wellbeing, with collaborative approaches that are proactive and focused on prevention rather than treatment, and with services that are more targeted
- 1 ii) Facilitate, support and resource the voluntary, community, faith and social enterprise sector, as well as residents and those who are carers
- 1 iii) Enable residents, carers and communities to better manage their own health and wellbeing, co-design activities and services, and influence local decisions relating to health and wellbeing
- 1 iii) Ensure our approach addresses social isolation and enhances belonging in the borough, taking into account our diverse and changing population

PRIORITY 2: Access to activities and support at the right place and time

There are a range of activities and help that can support residents in times of need. Resident input and analysis have identified challenges such as: getting primary care access when they need it; long-term conditions not getting diagnosed early enough; and areas where a lack of join-up between services causes frustration.

Our ambition is to create a local offer that is responsive to residents' needs, addresses these challenges and is accessed appropriately. This offer seeks to encompass all of our local assets (local authority (e.g. debt and housing), primary care services (GPs, pharmacies, dentists, optometrists), and VCFSE organisations), making sure information is readily available and accessible to residents, and addresses any difficulties residents may have in understanding health problems and knowing where to go for support.

What we aspire to achieve for residents

- 2a) When I need advice, activities or support, I know where and how to access it, and it is readily available
- 2b) Activities and services are linked up, work together appropriately around my needs and can be accessed in a timely way

How we plan to achieve this

- 2 i) Work with communities to understand how they identify and manage problems and seek help, and develop improved and accessible provision of information, advice and guidance on existing activities, services and access routes, considering health literacy, digital or language needs
- 2ii) Promote access to activities, care and support across health, care and wider services utilising a 'right care, right place, right time' principle which:
 - a) promotes early diagnosis and intervention
 - b) addresses identified challenges in access through primary care and referral pathways
 - c) addresses residents' holistic wellbeing needs
- 2 iii) Develop a proactive care approach which brings together teams to better support adults with multiple long-term conditions and/or frailty
- 2 iiiii) Prioritise using joint working and improved data sharing in focus areas to improve outcomes
- 2 iv) Work together as a system to develop and maintain a workforce that can deliver our ambitions, including developing the role of the VCFSE sector where appropriate

PRIORITY 3: Create an environment and opportunities that enable good health and wellbeing

The environment and circumstances we live in have an impact on our health, wellbeing and ability to thrive. We know that many residents struggle to make ends meet, may not feel secure in their housing situation, and may not access outdoor space. When the environment we are in is not supportive, this can cause stress and impact our ability to eat well, exercise enough and maintain relationships with others.

Residents have fed back that they want to feel they are in a clean and safe environment and are able to access learning, development and employment opportunities. Many of these factors may be difficult and take time to change, but we are committed as a partnership to act where we can to create a more enabling environment. This includes developing the Marmot framework to underpin action on inequalities.

What we aspire to achieve for residents

- 3 a) My local environment, transport and housing are planned and regulated in a way that takes account of my physical and mental health and wellbeing
- 3 b) I have access to the employment, training, social and cultural opportunities I need to live a healthy, happy life

How we plan to achieve this

- 3i) Develop a health in all policies approach across the public sector and commissioned agencies that impact the wider determinants of health and wellbeing (in particular housing, employment and education, violence and safety, access to nature, food and diet, opportunities for physical activity, culture and heritage) and work together to ensure healthier choices are the easiest to make
- 3ii) Develop solutions that are co-designed and developed with our communities, building on their needs, wishes and strengths to create a prevention offer that is proactive and independence-creating (aligned with Priority 4)
- 3iii) Ensure our approach addresses housing , finance and employment support for people with or at risk of long-term conditions

PRIORITY 4: Promote healthier lifestyles and prevent ill-health and care needs

We know from the statistics that residents live fewer years in good health than most in neighbouring boroughs and are therefore likely to need support from health and care services earlier. Half of adult social care referrals are for physical needs.

We also estimate there are significant numbers of people with physical and mental health conditions who have not yet been diagnosed. Supporting healthier lifestyles, earlier diagnosis and help for those with long-term conditions to self-manage will help prevent the development and worsening of long-term conditions and care needs. This also improves the overall quality of life for residents.

What we aspire to achieve for residents

- 4a) I feel supported, empowered and sufficiently well-informed to take care of my health and wellbeing, manage any health condition I have, and to live an independent life

How we plan to achieve this

- 4 i) Take a genuine and committed approach to prevention across policies and service delivery, shifting decision-making and funding to support this
- 4 ii) Ensure our approach has a clear focus on reducing obesity and smoking; and enhancing community mental health and wellbeing in the borough
- 4 iii) Enhanced support for self-management and promoting an independent life for people with, or at risk of, long- term conditions and/or disabilities

PRIORITY 5: Fair and equitable opportunities for everyone to live well and achieve their potential

We know that not everyone has the same opportunities to access and benefit from the activities, support and care available, and people of different characteristics may be likely to have different health and wellbeing needs. This includes: whether opportunities are fair for those with ‘protected characteristics’ (age, disability, gender, sex, pregnancy/maternity; race; religion; sexual orientation); whether someone is vulnerable, for example due to safeguarding needs; or whether people are likely to be excluded from opportunities due to financial constraints, housing issues, lack of digital access or lack of education and attainment opportunities. Without adapting our approach, some people may fail to benefit from the work across all other priority areas.

As a partnership we will work together with our residents and communities to both better understand these needs and to find solutions to issues that we identify.

What we aspire to achieve for residents

- 5 a) If my characteristics or personal situation leave me vulnerable or otherwise disadvantaged, I am not excluded from opportunities to access activities, care and support, and to live well and achieve my potential.

How we plan to achieve this

- 5 i) Targeted action by partners on inequalities in access and outcomes for vulnerable and/or disadvantaged people, making best use of data, insights and strategic approaches to delivery, for example homeless health
- 5 ii) Improve the range and accessibility of activities, care and support for neurodiverse or autistic people and people with learning disabilities
- 5 iii) Reduce prevalence and mitigate harms caused by domestic abuse, working with safeguarding partners

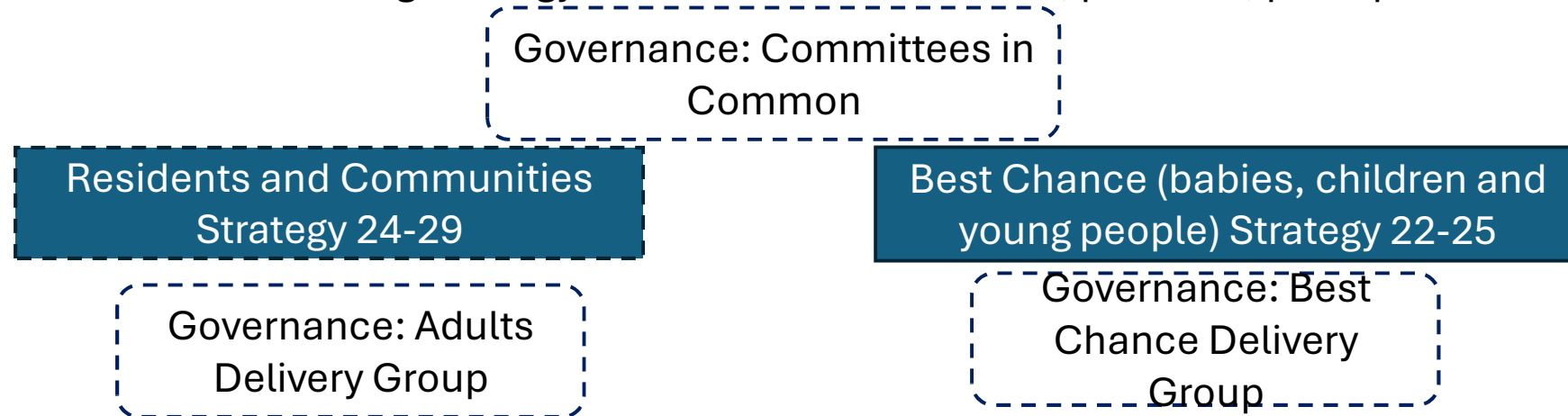
Place Partnership Strategy and Governance

NEL ICB Forward Plan 23-28

JHWS 2023-28

B&D Together Borough Manifesto 2020-2037 / Corporate Plan 23-26

The Joint Health and Wellbeing Strategy sets out our shared vision, priorities, principles and outcomes



The Residents and Communities Strategy and Best Chance Strategy fix medium-term objectives and outcomes to further guide and develop joint working and transformation to achieve core ambitions of the Joint Health and Wellbeing Strategy.

The ambition going forward is that the priorities for each strategy will be achieved through annual delivery plans and overseen by Adults, Best Chance and Executive Delivery Groups respectively.

Ambition: Single annual B&D Partnership delivery plan

Governance: Partnership Executive

Potential Core Outcome Indicators

We intend to monitor our progress against some of these overarching aims; so that we can see whether our actions are having the intended impact. We will do this using a set of regularly measured indicators as well as conducting a bespoke survey with residents based on rating against the 'I statements' before, during and after the strategy launch. Provisional indicators are outlined below and will be developed alongside delivery plans.

These indicators are under development and will be shared for consultation at a later stage

Bookcase: Aligning Strategies and Plans



LBBD

[Barking and Dagenham Together Borough Manifesto 2020-2037](#)
[Corporate Plan 2023-2026](#)
[Carer's Charter and Action Plan](#)
[Safeguarding Adults Board Strategic Plan](#)
[Adult Social Care Improvement Plan](#)
[Community Safety Partnership Plan](#)
[Serious Violence Duty Strategy 2024](#)
[Tobacco Harm Reduction Strategy](#)
[Voluntary, community and social enterprise strategy](#)
[Cohesion and Integration Strategy](#)
[Information Technology Strategy 2021 to 2028](#)
[Good Food Plan 2023 \(in development\)](#)
[Barking and Dagenham Draft Local Plan \(In development - to 2037\)](#)
[Localities Plan \(In development\)](#)
[Adult Social Care Prevention Plan \(in development\)](#)
[Learning Disability and Autism Strategy \(in development\)](#)
[Housing Strategy \(in development\)](#)
[Parks and open Spaces Strategy \(in development\)](#)
[Culture and heritage Strategy \(in development\)](#)



NEL Integrated Care Board/ System

[Barking and Dagenham Joint Forward Plan Refresh 2024](#)
[North East London ICS Green Plan 2022-25](#)
[Fuller Stocktake Report \(national NHS\)](#)
[NHSCore20Plus5 \(national NHS\)](#)
[Homeless Health Strategy \(In Development\)](#)



Other Partner Organisations

[NELFT Annual Plan 2023-24](#)
[NELFT Best Care Clinical Strategy](#)
[BHRUT Annual Plan 24-25](#)
[BD Collective Together We Lead Strategy](#)
[Barking and Dagenham Giving Strategy 2023-2026](#)