

LONDON BOROUGH OF CAMDEN	WARDS: All
REPORT TITLE Themed Debate – Camden’s response to the government’s consultation on the 10 Year Health Plan for England	
REPORT OF Cabinet Member for Health, Wellbeing and Adult Social Care	
FOR SUBMISSION TO Council	DATE 18 th November 2024
SUMMARY OF REPORT This is the background report for the Full Council debate being held on 18th November 2024, on Camden’s response to the government’s consultation on a 10-Year Health Plan for England. During the debate we will hear contributions from a range of Camden stakeholders, including elected members, residents, representatives of partner organisations, and policy experts, which may inform Camden’s response to the government’s consultation. Local Government Act 1972 – Access to Information <ul style="list-style-type: none"> • State of the Borough 2024 • Annual Public Health Report • Health and Wellbeing Strategy 2022-30 Contact Officer: Hugh Smith, Corporate Strategy Portfolio Lead, London Borough of Camden, 5 Pancras Square, N1C 4AG, hugh.smith@camden.gov.uk	
RECOMMENDATIONS The Council is asked to consider the report.	

Signed:



Jess McGregor, Executive Director for Adults and Health

Date: 07/11/2024

1. CONTEXT AND BACKGROUND

Introduction

- 1.1 We Make Camden is the vision that we share for our borough with our communities. It articulates five ambitions for Camden, including that “Camden communities support good health, wellbeing and connection for everyone so that they can start well, live well, and age well.” Health inequalities arising from social and environmental factors and inequity of access to healthcare among marginalised groups and compounded by the experience of the Covid-19 pandemic are identified as the major challenges for Camden to address in partnership with the NHS, healthcare professionals, the voluntary and community sector, and other partners. We recognise that good health and wellbeing is not shaped solely by health and care services but by the communities in which people live, the jobs they do and the environment in which they were born.
- 1.2 We Make Camden is clear that Camden Council is committed to improving health outcomes for our communities by preventing poor health and reducing inequalities. We are committed to improving health and care services through integrating delivery, focusing on early intervention, and working cross organisationally to include social determinants such as housing, the built environment and transport. Camden holds a firm belief that public services should be embedded in local places and work with the strengths of residents and communities to build resilience and the means to live good lives.
- 1.3 There is a strong commitment in Camden to working in partnership to improve health in our communities. The Health and Wellbeing Strategy 2022-30 articulates the commitment shared by all members of Camden’s Health and Wellbeing Board to “work together to deliver the very best universal services, while proudly placing collective focus on improving health outcomes for the most disadvantaged people in Camden.” The strategy provides a shared vision for the partnership and unifies partners behind a set of guiding principles, long-term strategic ambitions, and short-term priorities that were developed in response to what residents told us through the Citizens’ Assembly on Health and Wellbeing. Together, we are committed to improving population health and reducing inequalities, bringing about better physical and mental health, and ensuring that everyone can live well regardless of background or circumstance.
- 1.4 The subject of this report is the government’s consultation on a 10-Year Health Plan for England. It provides background and contextual information that situates the consultation within the evolving landscape of health policy in England, an overview of the consultation and the questions that the government is asking organisations to respond to, and an overview of the key data regarding health in Camden. The report concludes by outlining themes and priorities that may provide starting points for Camden’s response to the consultation.
- 1.5 During the debate, we will have an opportunity to hear about the *views* of partners, young people in Camden, and subject matter experts. Speakers

have been asked to talk about the challenges that Camden's communities face and how the government's 10-Year Health Plan could address them.

Background to the government consultation on the 10 Year Health Plan for England

- 1.6** The government has committed to five missions that address systemic challenges in the UK economy and public services. Among these is a mission for health, in which the government has committed to: "Build an NHS fit for the future that is there when people need it; with fewer lives lost to the biggest killers; in a fairer Britain, where everyone lives well for longer." The government has expressed a position that achieving the objectives of its missions will require collaboration between central government and the private sector, civil society, and devolved and local governments.
- 1.7** The government has subsequently committed to formulating a 10 Year Health Plan for England. The purpose of this plan will be to set out the steps that the government and other partners will take to deliver the objectives of the health mission in England. The 10 Year Health Plan for England will be informed by the Independent Investigation of the National Health Service in England, chaired by Lord Darzi. The report, which can be accessed [at this link](#), was published in September 2024, and reports findings regarding a wide range of issues, including waiting times for treatment, quality of treatment, difficulty accessing certain services, and significant pressures on parts of the NHS. In addition to the publication of Lord Darzi's report, the government has expressed its intention to facilitate a "national conversation" about the future of the NHS.

Overview of the consultation on the 10 Year Health Plan for England

- 1.8** The government launched its consultation on the 10 Year Health Plan for England on Monday 21 October 2024. Members of the public, NHS staff, and organisations are invited to share experiences, views, and ideas for change through an online platform, which can be accessed [at this link](#).
- 1.9** This consultation is an opportunity for any individual or organisation with experience of accessing NHS services, working in or with the NHS, delivering healthcare services, or delivering services that contribute to public health and wellbeing to share experiences and views on the system of health services and how changes in policy or practice may support its future performance and resilience.
- 1.10** The space on the online platform for submission of organisational responses asks organisations to respond to the following five questions:
 - 1.10.1** What does your organisation want to see included in the 10-Year Health Plan and why?
 - 1.10.2** What does your organisation see as the biggest challenges and enablers to move more care from hospitals to communities?

1.10.3 What does your organisation see as the biggest challenges and enablers to making better use of technology in health and care?

1.10.4 What does your organisation see as the biggest challenges and enablers to spotting illnesses earlier and tackling the causes of ill health?

1.10.5 Please [...] share specific policy ideas for change. Please include how you would prioritise these and what timeframe you would expect to see this delivered in, for example:

- Quick to do, that is in the next year or so.
- In the middle, that is in the next 2 to 5 years.
- Long term change, that will take more than 5 years.

1.11 The questions at 1.10.2, 1.10.3, and 1.10.4 correspond to three “shifts”, which are the government’s principles for reform of the healthcare system that will form the basis of the 10 Year Health Plan. It can be reasonably anticipated that the specific measures outlined in the final 10 Year Health Plan will support the objectives of moving care from hospitals to communities, making better use of technology in health and care, and spotting illnesses earlier and tackling the causes of ill health.

1.12 The deadline for organisational responses is Monday 2nd December. Camden Council intends to submit a response so that the 10 Year Health Plan for England may be informed by insights from our experience of working with partners and communities to address health challenges, methods pioneered in Camden to involve communities in participatory policy making, and our priorities for public service reform that will enhance local collaboration and put local government at the centre of national health policy.

2. HEALTH IN CAMDEN - KEY DATA

2.1 The response from Camden Council to the consultation on the 10 Year Health Plan for England may be informed by relevant data and information regarding health and wellbeing among Camden’s communities. Camden’s Public Health Outcomes Framework and the State of the Borough 2024 report set out key data on health in Camden, corresponding to the We Make Camden ambition for Good Health and Wellbeing – that Camden communities support good health, wellbeing, and connection for everyone so that they can start well, live well, and age well. The State of the Borough report’s detailed findings are summarised below, and the report is attached at Appendix A for reference.

2.2 Camden residents experience some of the largest health inequalities in London. Men living in our most deprived areas die on average 13.5 years earlier than those living in the least deprived areas and for women it is nearly 10 years. This gap is due to a range of factors including smoking, low levels of physical activity, alcohol use and diet; social determinants such as housing and income and access and use of health and care services. Reducing rates of cardiovascular disease and cancers are key priorities in improving life expectancy. Insight from engaging with communities through the Health and

Care Citizens Assembly, during the Covid-19 pandemic, and through subsequent ongoing engagement suggests that access to healthcare services for marginalised communities is likely to be a significant factor that contributes to health inequalities overall.

- 2.3** Census data demonstrates that there are health inequalities in Camden that correspond to race and ethnicity as well as to socio-economic circumstances. The 2021 Census asked people to assess their general health on a five-point scale, between 'very good' to 'very bad'. 43% of people aged 65 and over in Camden reported their health as not good. Across ethnic groups, there are differences in the share of over 65s reporting poor health, with 40% of White people over 65 reporting their health as not good, but 50% of Black people, other ethnicities, and 53% of Asian people.
- 2.4** Moreover, disabled people make up 15.2% of the population in Camden. Among this group, 31% define their health as bad or very bad, compared to 1% of non-disabled people, and only 33% of disabled people say their health is good or very good, compared to 94% of non-disabled people.
- 2.5** The health and wellbeing of unpaid carers is a priority for local health partners and was the subject of the themed debate at the Council meeting in July 2024. The report prepared for the themed debate noted that between April 2023 and March 2024, 4,400 carers were registered with Camden carers and that people with caring responsibilities often experience poor mental and physical health and have their own unmet care needs. In Camden, 8% of women and 6% of men provide unpaid care. This gender disparity in unpaid care is consistent across ethnic groups and socio-economic groups.
- 2.6** Camden's Annual Public Health Report 2023 focused on adolescent health and wellbeing. The report highlighted issues experienced by young people in Camden that influence their health and wellbeing. These issues include increasing levels of mental health conditions, concerns related to personal safety among majorities within all age groups as well as ethnicities and genders, food insecurity, and obesogenic environments. The report includes recommendations for measures to be taken forward by local health partners. The report is attached at Appendix B for reference.
- 2.7** Poor mental health among children and young people has been an increasing concern in recent years, both in Camden and nationally. The Covid-19 pandemic and cost of living crisis have had a detrimental impact on the wellbeing of children and young people. In Camden, as across the UK, there have been increases in the number of children with social, emotional and mental health (SEMH) needs. 3.3% of children in England and 2.8% in London are identified as having SEMH needs. In Camden, this figure increased from 2.6% in 2015/16 to 3.9% in 2022/23 and is one of the highest across Inner London boroughs. This increase is mirrored in an increase in the number of children in Camden with special educational needs and disabilities (SEND). Hospital admissions for self-harm among children and young people have also increased, with admissions for young women being much higher than admissions for young men and at a higher rate than the London average but lower than the England average.

- 2.8** In Camden, among people 18-year-olds and over, the percentage of people diagnosed with depression has been rising, with rates in 2022/23 at 10.7%, up from 5.5% in 2013/14, which is a lower level than across London but a higher level than across England. Anxiety levels are higher in Camden on average than in London and England.
- 2.9** Loneliness has a significant impact on wellbeing, and is correlated with prevalence of mental health conditions, physical health conditions, hospital admissions and readmissions, and disengagement from employment. In Camden, the share of adults who reported feeling lonely was 36.3% in 2019/20, higher than all other London boroughs. We Make Camden articulates loneliness as a challenge, with an ambition to ensure that “no-one in Camden is socially isolated and without the means to connect to their community.”
- 2.10** The number of people who are out of the workforce because of long-term health conditions has been increasing since the Covid-19 pandemic, in particular for reasons of mental health. In Camden, 59% of people with long-term health conditions are employed, compared to 66% in London and 65% in England.
- 2.11** Certain behaviours are known to have an impact on physical and mental health. While the rate of physical inactivity in Camden is relatively low compared to London and England, and rates of obesity are also lower than average, there is a population health crisis linked to obesity, and inequality of participation is a concern as certain population groups are less active than the general population at a national level, including people from some Black, Asian and other ethnic groups; people with disabilities, older adults, and people living in more deprived circumstances.
- 2.12** Smoking is the leading cause of preventable health issues and early death in the UK. Fewer people smoke in Camden than across England, at 9.1% in 2022 compared to 13% across England. The percentage of people 18 and older who smoke has halved in Camden over the past decade, from 18.2% in 2011. Clear inequalities in smoking within Camden remain. Those living in more deprived circumstances are more likely to smoke, and there are considerably higher smoking rates among people with certain long term conditions including severe mental health conditions and respiratory conditions.
- 2.13** Alcohol is one of the key drivers of ill health and early deaths, with its impact driving health inequalities. Camden has a higher rate of alcohol-related hospital admissions and drug misuse deaths compared to the London average. Approximately two-thirds of people receiving support from substance misuse services also have an identified mental health support need.
- 2.14** Supporting residents to age well is a long-term strategic priority for local health partners. Falls are the largest cause of emergency hospital admissions for older people and can have a major impact on long term outcomes such as older people’s ability to live independently. In Camden in 2021/22, it is estimated that 610 people were admitted to hospital due to fall injuries,

representing a rate of 2,484 for every 100,000 people. This is higher than the England rate and most other Inner London boroughs.

- 2.15** Overall population-level subjective wellbeing can be summarised by measuring life satisfaction, which has been measured consistently in the UK since 2010, providing a picture of how we are doing as individuals, communities and as a nation. According to (Office for National Statistics (ONS) data, when asked on a scale of 0 to 10, people in Camden rate their life satisfaction at 7.29, lower than the England average (7.44) and London (7.35).

3 HEALTH IMPROVEMENT IN CAMDEN

- 3.1** Camden's response to the government's consultation on the 10 Year Health Plan for England may draw on the Council's experience of working with partners and communities to support improved health outcomes for Camden residents. This section highlights Camden's strategic positions and local initiatives that may inform the Council's response.

Health and Wellbeing Strategy 2022-30

- 3.2** In February 2020, Camden Council launched a Health and Care Citizens Assembly. The Citizens' Assembly brought together a representative cross-section of local residents for discussions around health and care services in the borough. Through a deliberative process, participants developed priorities for local health and care organisations to inform the Health and Wellbeing Strategy 2022-30 and sets of expectations for how partners should deliver on these priorities. The full report of the Citizens Assembly can be accessed [at this link](#).
- 3.3** The Citizens Assembly defined the following three priorities for local health partners:
- 3.3.1** Reduce health inequalities in the borough. Ensure that local services can tackle the impact of the pandemic on the most affected groups.
 - 3.3.2** Ensure my family, friends, neighbours and I can stay healthy, safe and well in Camden, particularly our mental health and emotional wellbeing.
 - 3.3.3** Ensure local services work together to meet the needs of residents and communicate effectively with local people.
- 3.4** The Health and Wellbeing Strategy 2022-30 has five guiding principles that reflect the priorities of the Citizens Assembly. These are:
- 3.4.1** Prioritising prevention. The strategy notes commitments to tackling the causes of health-related problems, focusing on the social determinants of health, transforming the environmental factors that influence health and wellbeing, prioritising early help, providing joined-up and person-centred support, striving for more community-based support embedded

in neighbourhoods, and nurturing collaboration with communities.

- 3.4.2** Tackling inequalities and disproportionality. The strategy notes commitments to tackling health inequalities, seeking to break the link between deprivation and health, embedding anti-racist practices, working with trusted partners in the community, and reducing disproportionality in health access and outcomes.
 - 3.4.3** Empowering communities. The strategy notes commitments to ensuring residents have control over their own care and understanding the options available to them, supporting local people to connect with and support each other, and co-designing services with communities.
 - 3.4.4** Integrating and communicating. The strategy notes commitments to pursuing greater integration and multidisciplinary working to improve residents' experience of care, promoting health through our networks, investing in digital transformation, and providing clear information about services.
 - 3.4.5** Sharing responsibility. The strategy notes commitments to forging partnerships across sectors, aligning resources, building capacity and resilience across the partnership workforce, and forming a network of anchor institutions that support an inclusive local economy.
- 3.5** The Health and Wellbeing Strategy has three long-term strategic ambitions. Together they capture our aspirations for population health in 2030 and represent our long-term vision for health and wellbeing in Camden:
- 3.5.1** Start Well – All children and young people have the fair chance to succeed, and no one gets left behind.
 - 3.5.2** Live well – People live in connected, prosperous, and sustainable communities.
 - 3.5.3** Age well – People live healthier and more independent lives for longer.
- 3.6** The strategy has three short-term priorities for action. These seek to galvanise partnership action around the social determinants of health and demonstrate commitment to the five principles noted at 3.1.1 to 3.1.5. The priorities are that children should be healthy and ready for school, good work and employment, and community connectedness and friendships. The Health and Wellbeing Strategy 2022-30 details the action being taken to advance these priorities and is attached at Appendix C for reference.

Health in All Polices: Camden as a Population Health Borough

- 3.7** Camden aims to become a population health-driven organisation, which means that we consider all factors that influence people's health. By working closely together across the four pillars of population health, as set out below, we can lay the groundwork to reduce health inequalities and improve overall health outcomes for our community.

- 3.8** The first pillar is the social determinants of health. Recognising that employment and social connections have significant influence on health, the Council has brought together colleagues from Good Work Camden, the voluntary sector, and health partners to take forward action to build closer links between health and employment support services, while the Council is also working to raise awareness of social isolation among frontline staff through dedicated training sessions and among the general public through a communications campaign.
- 3.9** The second pillar is resident experience of health and care services. This pillar has guided partnership work to raise levels of childhood immunisations through community outreach, community-based information sessions, and communications across our digital channels. Immunisation remains a challenge for Camden and is a topic that the 10 Year Health Plan for England may address. This pillar has also guided the design of services offered by Change Grow Live to residents who are struggling with substance use in order to prioritise treatment access.
- 3.10** The third pillar is resident behaviours. This pillar guides action on the key four behavioural risk factors that make the greatest contributions to disability and early deaths: physical inactivity, smoking, alcohol consumption at harmful levels, and poor nutrition. This action includes physical activity services, Camden's local smoking cessation service, and sexual health services. Camden operates these services in partnership with the local voluntary and community sector as well as NHS trusts and GPs.
- 3.11** The fourth pillar is the places and communities residents live in. This pillar guides the Council's work to support participation in local communities. For example, the Community Champions programmes in Kentish Town, Kilburn, and Regent's Park support local health and wellbeing by creating connections within communities through resident-led civic action.

Integrated Neighbourhoods Teams

- 3.12** Integrated Neighbourhood Teams (INTs) represent a significant area of partnership between Camden and NHS partners. These teams embody a new model of multi-disciplinary and multi-agency health and care, operating at the neighbourhood level to provide better coordinated and more holistic care.
- 3.13** The first INT has been launched as a pilot in the East Neighbourhood based at Kentish Town Health Centre, where staff from adult social care, primary care, and community health services are now co-located. Through regular multi-disciplinary team meetings, team members work together to enhance care for patients with complex needs, including older adults with multiple long-term conditions and individuals facing intricate social and mental health challenges. A key focus will be on proactive measures to prevent ill health.
- 3.14** Ultimately, the goal of our Neighbourhood approach is to foster stronger connections among health and care teams, as well as between health and care and the wider range of council and voluntary sector services, enabling them to respond more effectively to the needs of the communities they serve.

Child Health Equity

3.15 Raise Camden is the borough's child health equity programme, a place-based test bed for innovation to address intergenerational health injustice. Our long-running programme has begun with a two-year collaboration with Professor Sir Michael Marmot's Institute of Health Equity. It represents a continuation of Camden's longstanding collaboration with the Institute of Health Equity, which has featured Professor Sir Michael Marmot's membership of the Camden Renewal Commission and Camden embedding the social determinants of health framework that has been pioneered by the Institute's research into our Health and Wellbeing Strategy 2022-30.

3.16 In its first year, the Raise Camden programme focused on service improvements within the Council's existing resources. The second year will focus on larger-scale, grant-funded initiatives with academic and voluntary sector partners. Examples of test and learn pilots under Raise Camden are below:

3.16.1 The Council is currently progressing initiatives alongside health partners to establish an A&E follow-up clinic in Family Hubs and to create a youth champions programme aimed at young people with underlying health conditions that will foster connections to their communities. The bi-monthly A&E follow-up clinics are co-located with parent volunteering and welfare advice, offering a comprehensive support system.

3.16.2 The Council is working with Nesta to pilot cash transfers in pregnancy. A £500 one-off grant will be transferred to all pregnant people known to our benefits system, which has been shown to reduce the prevalence of low birth weight babies. We intend to establish the extent to which this can reduce high-cost NHS services and increase uptake of preventative services.

Joined-up Prevention Work with the NHS and Other Health Partners

3.17 The Council works effectively with local NHS partners and anchor institutions to support the early detection and prevention of long-term health conditions and to develop innovative models of health promotion. The four initiatives outlined below demonstrate a shared commitment to prevention across our partnership.

3.18 Camden's Child and Adolescent Mental Health Service (CAMHS) operates as an integrated partnership between Camden Council and the Tavistock and Portman NHS Foundation Trust. CAMHS in Camden has good outcomes associated with the benefits of this model of partnership, preventative investment, and add-on services that young people in Camden may access. As noted at paragraph 2.7, poor mental health among children and young people has been an increasing concern in recent years, both in Camden and nationally, and as such we are committed to building on our local integrated model. In a research-led collaboration with the Tavistock and Portman NHS Foundation Trust, Central and North West London NHS Foundation Trust, and University College London, we are developing a model of mental health

provision that works to break intergenerational patterns of poor mental health, recognising that parental mental health is a key determinant of children's mental health.

- 3.19** The Camden Mobile Health Bus is a partnership initiative between the Council and Brondesbury GP Practice, which offers free preventative health check-ups in convenient and accessible locations across the borough. The walk-in service includes assessments for diabetes risk, blood pressure, and weight, along with provision of health information and advice.
- 3.20** Camden Council has developed improved referral mechanisms into the NHS Diabetes Prevention Programme (NDPP). A recent project successfully utilised text message alerts to notify individuals identified as being at risk of diabetes, significantly increasing referrals into the programme and helping to reduce inequalities related to ethnicity and deprivation. Additionally, the Council recently held the first of two community finger-prick blood testing events planned for the borough this year, where over 50% of attendees were referred to their GP for further investigations or directly to the NDPP.
- 3.21** Camden works closely with the North Central London (NCL) Cancer Alliance, which unites patients, hospital trusts, GPs, health service commissioners, and local authorities to improve cancer outcomes and care. The Council is supporting an ongoing public awareness campaign led by Healthwatch Camden to raise awareness of cancer and the importance of cancer screening in the borough.
- 3.22** In addition to the four initiatives noted above, it is notable that the voluntary and community sector (VCS) in Camden plays an important role in supporting the creation of communities that can sustain and promote health. VCS organisations in Camden have played important roles in recent years in leading the community responses to the Covid-19 pandemic, the arrivals of refugees from Afghanistan and Ukraine, and the cost of living crisis. Local VCS organisations are also very significant actors in our collective effort to achieve the We Make Camden ambition of Camden communities that support good health, wellbeing, and connection for everyone so that they can start well, live well, and age well. The report on the State of the Voluntary and Community Sector in Camden, which can be accessed [at this link](#), highlights some of the impact that the more than 2,400 VCS organisations across Camden make. Seven-year grants of between £10,000 and £100,000 per year have been awarded through Camden's Community Partner Fund to 38 organisations who are deeply rooted in Camden's communities with a strong focus on neighbourhoods and equalities. The fund supports Camden based organisations who take a preventative approach to social challenges; empower communities and support social action; and tackle inequalities and disproportionality.

4 CAMDEN'S CONSULTATION RESPONSE

- 4.1** This section outlines themes that may inform Camden Council's response to the consultation on the 10 Year Health Plan for England. These themes are drawn from the Council's agreed policy, budget framework, models of service

delivery, and frontline practice.

- 4.2** In line with Camden's Health and Wellbeing Strategy, the 10 Year Health Plan for England should engage with the social determinants of health. It should recognise the critical influence on individual and population health of factors including education, employment, household incomes, housing, and social connectivity. It should also recognise the influence of environmental factors on health, including air quality, the built environment, and climate change. Noting the limits of central government's capacity to act directly, and noting the government's ambition to tackle the causes of ill health as noted at paragraph 1.10.2, the 10 Year Health Plan should set out how the government will work across sectors to ensure that social and economic life in England support positive health outcomes. Camden has a long-standing commitment to prevention and early intervention in public services, and a focus on the social determinants of health is key to tackling the causes of ill health and therefore preventing poor health outcomes.
- 4.3** Recognising the ways in which local government touches on the lives of local residents and communities and the ways in which local authorities affect the circumstances and environments in which people live, it is reasonable to assert that addressing the social determinants of health will require close collaboration between central and local government. There should therefore be a central role for local government in the 10 Year Health Plan for England. Camden would welcome a defined role for local government that reflects the strengths of our sector, including our knowledge of and relationships with local communities, agility and efficiency in public service delivery, and capacity to convene a wide range of services and partner organisations around complex challenges.
- 4.4** A discussion about the future of adult social care is inextricable from a plan for the future of the healthcare system in England that has a central role for local government. The adult social care sector at national, regional, and local levels faces pressures associated with rising costs and levels of complex need within communities. An effective and resilient adult social care sector is a necessary precondition for the government's ambition to create an NHS fit for the future that is there when people need it. The government has committed to progressing plans to create a National Care Service, which would be defined by nationally established standards for adult social care services and locally designed and locally led delivery of those services. The 10 Year Plan for Health in England should feature concrete steps towards establishing the National Care Service and securing the future of the adult social care sector.
- 4.5** Local government as a sector will need the 10 Year Plan for Health in England to engage with communities' lived experiences of places and the ways in which services that support good health may need to work differently in different places. Noting the government's ambition for health services to be moved closer to communities, noted at paragraph 1.10.2, Camden's experience would suggest that adopting a place-based approach to planning for the future of health services in England will create opportunities for local authorities to engage constructively with the delivery of the plan, drawing on the strengths, assets, and social infrastructure that exist in communities in doing so. Development of Integrated Neighbourhood Teams in Camden, as

noted at paragraphs 3.12 to 3.14, offer a model to government for services that support population health through place-based integration and service design.

- 4.6** The consultation on the 10 Year Health Plan for England is an encouraging signal that the government shares Camden's commitment to citizen participation and partnership in its approach to policy development. Our Health and Care Citizens Assembly and participatory exercises including further citizens assemblies and deliberative forums have demonstrated the value of bringing citizens into discussions about the future of public services. Meaningful citizen engagement and participation, working with those who draw on care and support to design services that work best for them, is a precondition for shaping and building trust in health services that reflect the needs of diverse populations like Camden's.
- 4.7** The government's ambition to make more use of technology in health services, as noted at paragraph 1.10.3, will need to engage with the need to build public trust in the ways in which technology is applied. Deliberation with residents to shape Camden's Data Charter demonstrated that there is very significant value in engaging the public on topics that may appear technical and complex to non-specialists. Camden would therefore encourage the government to continue to build participatory methods into its policy development processes, including further iterations of the Health Plan for England. In particular, we would encourage the government to draw on Camden's experience of citizen participation on the Data Charter to inform how it approaches bringing the voices of the public into policy development on technology in health and care.
- 4.8** Members are invited to reflect on these themes and to make contributions during the debate that may inform Camden Council's submission to the consultation on the 10 Year Health Plan for England.

5 LEGAL IMPLICATIONS

- 5.1** The Borough Solicitor has been consulted on this report and has no comments to add to this report.

6 RESOURCE IMPLICATIONS

- 6.1** While this report does not directly address resource implications, it's important to recognize that Camden, like other council, is significantly affected by any proposed changes in the NHS. Our collaborative operations and financial arrangements mean that any policy shifts, specifically those aimed at shifting care from hospitals to community settings, will directly influence demand and, consequently, our budgets.
- 6.2** Following the announcement at the budget in October 2024 of a £22.6bn investment in the NHS, it is important to note that the challenges facing the NHS cannot be addressed in isolation. They are closely tied to the state of adult social care.

- 6.3** While the Department for Health and Social Care has a clear process for developing a future plan for the NHS, the government is yet to announce a plan for long-term investment in adult social care.

7 ENVIRONMENTAL IMPLICATIONS

- 7.1** The government's 10 Year Health Plan for England may address ways for the NHS to reduce its carbon emissions in line with national targets.

8 APPENDICES

Appendix A: State of the Borough 2024

Appendix B: Annual Public Health Report 2023

Appendix C: Health and Wellbeing Strategy 2022-30

REPORT ENDS