# Health and Wellbeing Strategy for Somerset

2012 - 2015

## Consultation



## Foreword



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Many things influence our health and wellbeing, including the lifestyles we lead, the food we eat, the environment around us and what we do for a living, as well as the health and care services which support us. Overall, the health of the people in Somerset is good and there have been many improvements in recent years including reduced deaths from heart disease, stroke and cancers.

Everyone in Somerset should have the right to enjoy good health and wellbeing but some groups and communities systematically experience poorer health than others. Whilst this strategy aims to improve the health and wellbeing of everyone in the county, it will focus particular attention on making faster improvements for those who are most vulnerable and experience a poorer quality of life.

This is the first Health and Wellbeing Strategy for Somerset, led by a new Health and Wellbeing Board for the county. The strategy puts forward a shared vision for health and wellbeing and gives us a way to jointly agree priorities and action to make a significant difference to the lives of local people. The strategy is not meant to cover everything that impacts on health and wellbeing, it focuses on three broad priorities which need a shared vision and joined up action to address them.

The Board will have an annual work programme which will include specific actions under each priority, some examples of these are provided within the document. Most importantly however, we are hoping that local groups, parishes, communities and neighbourhoods can identify with the overall priorities in this strategy and can be inspired to take local action or align work that is already going on that can contribute to improving the health and wellbeing of local people.

Health and wellbeing is everyone's business and, as such, your views on the vision and priorities in this strategy, and how we could all work together to improve health and wellbeing would be very much appreciated.

# Health and Wellbeing Strategy for Somerset

This strategy sets out a shared sense of direction and some key priorities for improving health and wellbeing in the county. The priorities will provide the focus for the Somerset Health and Wellbeing Board up to 2015. They will be used to align the plans across organisations to make sure that we are all working as efficiently and effectively as possible.

The strategy is not meant to cover everything that impacts on health and wellbeing. The three overarching priorities have been selected because they have been identified through the Joint Strategic Needs Assessment and consultation as issues that significantly influence health and wellbeing currently and to an even greater extent in the future. They will need shared leadership and joined up action across a number of organisations and groups to make a transformational change. The criteria used to identify priorities for this strategy can been seen in Appendix 1.

# Shared Vision for Health and Wellbeing in Somerset

People live healthy and independent lives, supported by thriving and connected communities, with timely and easy access to high-quality and efficient public services when they need them.

### **Key Priorities**

Priority 1: People, families and communities take responsibility for their own health and wellbeing.

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Priority 2: Families and communities are thriving and resilient.

Priority 3: Somerset people are able to live independently for as long

as possible.

# Underlying Principles

The focus for this strategy is to improve health and wellbeing overall, but to make improvements faster for groups and communities that experience poorer health and quality of life.

To make the best use of resources, the work contributing to this strategy will apply the following principles:

#### **Equity**

Provision of services should be proportional to need and targeted to the areas, groups and individuals that need them most.

### Accessibility

Services should be accessible to all, with factors including geography, opening hours and physical access being considered.

#### **Integration**

Where the integration of services provides an easier system and better outcomes for people within the same overall cost, all relevant organisations should work together to maximise the local benefits.

#### **Effectiveness**

Activities and services should be evidence-based and provide value for money.

#### Sustainability

The work contributing to this strategy should be developed and delivered with due regard to the environmental, economic and social dimensions of sustainability.

# Priority One

People, families and communities take responsibility for their own health and wellbeing

### Why is this important?

We all have a role to play in maintaining and improving the health and wellbeing of ourselves and our families, by trying to live a healthier way of life. We need to inspire and motivate individuals, families and communities to take responsibility for their own health and wellbeing and provide support to those who may need help to do so. The lifestyles we lead play a significant part in our health and wellbeing. Heart disease and cancers remain the main causes of premature deaths and health inequalities in Somerset, but for the most part, these diseases are preventable by changing our everyday habits.

In Somerset, it is thought that 18% of adults currently smoke and 18% of pregnant women continue to smoke throughout their pregnancy, one of the highest rates in the country. It is estimated that smoking costs the NHS in Somerset £25.9 million pounds a year.

Over three quarters of adults in Somerset do not do enough physical activity to benefit their health, the worst rate in the south west. This, combined with high calorific food and large portion sizes, has contributed to an increase in overweight and obesity in the county. It is estimated that 41% of adults in Somerset are currently overweight and 26% obese. Similarly, 23.4% of 4-5 year olds and 30.5% of 10-11 year olds are overweight or obese. Conditions associated with overweight and obesity are thought to cost the local NHS £138 million a year. This is predicted to rise as obesity-related conditions such as type 2 diabetes rise.

Alcohol misuse undermines family and community life. It contributes significantly to antisocial behaviour, crime, domestic violence and family breakdown. The proportion of people drinking high levels of alcohol is increasing in Somerset. There were 9,276 alcohol-related hospital admissions in Somerset in 2010.

### What would make a step change?

Because the way we live our lives is largely shaped by the people around us and the neighbourhoods we live in, the most effective way of encouraging healthier lifestyles is through community-led action. Making use of local opportunities, talents and facilities provides sustainable "built in" support and motivation provided by the people around us. Helping individuals and local professionals know what support is available locally is key to successful community action to encourage healthier lifestyles.

### **Action 1 – Community Action**

The Health and Wellbeing Board will give greater support for community-led action to encourage healthier lifestyles. Examples of action include developing local health walks and development of the NHS Health Checks Programme.

The environment we live in does not always make the healthy choices the easiest ones. Often small changes to adapt the environment can make a significant difference to the lifestyles we lead. For example, where cycle paths or road crossings are placed, availability of space to grow produce, or providing safe places to play, all have an impact on our lifestyles.

### Action 2 - Healthy planning and policy

The Board will ensure that health and wellbeing is given due consideration in planning and other policy decisions to maximise the positive impact of our environment on healthy lifestyles. Examples of action could include identification of community growing spaces, use of planning to influence the position of takeaways etc.

The Board is keen to focus greater attention on preventing ill health and will review key service areas to ensure there is a shift of resources towards prevention and that the effectiveness and efficiency of services is maximised through more integrated working.

#### **Action 3 – Prevention first**

The Board will develop a programme to review services in the county, to increase the focus on prevention and promoting healthy lifestyles as well as developing more integrated and efficient services. Examples of action include review of substance misuse and sexual health services.

## **Priority Two**

# Families and communities are thriving and resilient

### Why is this important?

People who live in thriving and resilient families and communities enjoy a sense of belonging, being cared for and valued. These feelings provide the foundations for better health and a sense of wellbeing and foster an environment which supports people to thrive and aspire to their potential. Unfortunately, not all people and families in Somerset experience these benefits, some are vulnerable and live fragile lives that are affected by even small changes to their circumstances.

Our mental health is an important indicator of our ability to cope with everyday life. It is thought that 70,000 people in Somerset have a mental health problem at any one time, often influenced by multiple things including low educational attainment, social isolation, unemployment and financial and relationship problems.

The social circumstances in which we live are complex, yet we often try and tackle one issue at a time, mainly in isolation from all the other things impacting on our lives. Our focus should be on developing well-connected, vibrant and supportive communities, thereby impacting on the circumstances in which people live rather than just specific issues. Well-connected communities have a higher reliance on products, assets, skills and facilities that are available within the immediate neighbourhood, thereby leading to greater environmental, social and economic sustainability, as well as greater resilience to outside forces such as an economic downturn and fuel and food price increases.

Educational attainment is important for longer-term resilience and is closely associated with health and wellbeing throughout life. In 2010-11, 57% of children in Somerset met the foundation stage requirements which is the measure used for school readiness. 57% of children in Somerset achieved five or more A\*-C grades at GCSE (including maths and English). For children in receipt of free school meals, this reduces to 28.3%. Despite notable progress made in educational attainment locally, improvements have been slower than the national increase.

### What would make a step change?

We need to work together to develop well-connected, vibrant and supportive communities that encourage people to buy local food, products and services where possible. Planning regulations should support the increase of small local enterprise and local employment opportunities, underpinned by developing individual financial and work skills. Local facilities should be made more available for community use in creative ways, helping to reduce the need to travel and encouraging local action and more social interaction within communities.

### **Action 4 – Well-connected, vibrant communities**

There will be a much greater focus on supporting neighbourhoods and communities to take responsibility for shaping and transforming their own lives and their local services. Examples of action include the development of more local community and health services.

Educational attainment needs to continue to improve overall, but to reduce health inequalities over the longer term, faster progress needs to be made for children from more socially disadvantaged backgrounds or vulnerable groups.

#### Action 5 - Improving educational attainment

The Health and Wellbeing Board will focus on continuing to improve educational attainment at GCSE and foundation level with particular focus given to the groups with lowest attainment. Examples of action includes work to support families to prepare children for starting school.

Some families experience considerable difficulties simultaneously and have a high need for public services. Greater integration of these services, tailored to the needs of the family, would be more effective at achieving improved outcomes for these families and would minimise additional stress for the users.

### Action 6 - Supporting families with low resilience

There will be specific focus on working with the least resilient families in our communities and ensuring smooth access to relevant and tailored services. Examples of work include the development of the Troubled Families Programme.

## **Priority Three**

# Somerset people are able to live independently for as long as possible

### Why is this important?

Between 2010 and 2035, the Somerset population is expected to grow by 12%. The largest increase is in people over the age of 75 years, where it is expected there will be a doubling of the population from 55,000 to 107,800, an increase of 2.7% per year.

Most people want to stay living independently for as long as possible and have strong emotional ties to their neighbourhoods. Having the right kinds of accommodation in the right places is one of the major factors that determine our ability to maintain independence, particularly as we get older. While moving house can be daunting and stressful at any time of life and, some older people will move for lifestyle reasons, many however only move at a time of crisis, usually when their care needs have increased. More needs to be done to increase the availability, suitability, appeal and marketing of homes that meet the longer term needs of people and enable people to enjoy a more independent life for longer.

In line with population changes, the proportion of people living with a long-term condition will increase. The number of people over 85 years living with a limiting long-term illness is predicted to increase by 15% between 2011 and 2015. Similarly, dementias currently affect 5% of people aged over 65 and 20% of those over 80 years but the changing age profile will result in significant increases in the number of people living with a dementia. The role undertaken by carers will become even more paramount to ensure people are able to remain independent. Services for carers should be joined up across organisations in the county to ensure the most effective and efficient support is provided.

In 2010-11, those aged 85 and over accounted for 14,333 admissions to hospital, of which 8,172 were emergencies. Older people at risk of losing their independence following an illness or hospital admission currently receive care and support from a number of organisations, often experiencing several handovers between professionals. These services could be more integrated with a focus throughout the system on regaining and promoting independence and, for as long as possible, working with people and the local community to help people remain in their own homes.

### What would make a step change?

The local planning system must support a mix of housing development, determined by the projected needs and preferences of the future population. In addition, older people need to be better informed of housing options at an early stage and more practical support needs to be available to help people with their housing needs in later life.

### **Action 7 – Housing for Independence**

There needs to be an increased focus on the changing housing needs of the Somerset population, with particular focus given to widening the housing options for maintaining independent living. Examples of action include delivery of the Somerset Vision for Housing through a joined up Somerset Housing Strategy which also considers issues of affordability, benefit changes and fuel poverty.

Timely and effective support for carers, that is joined up between organisations and makes efficient use of available resources is critical to supporting the vast number of voluntary carers in the county. In addition, well-connected neighbourhoods and communities can provide more informal support and opportunities for social engagement for carers.

### **Action 8 - Support for carers**

The Health and Wellbeing Board will ensure support for carers is integrated across health and social care. Examples of action include the setting up of a new universal service for carers in Somerset and establishing a Carers Partnership Board.

More integrated working between health and social care services can reduce the need for numerous assessemnts by different professionals and can provide a more complete picture of the individuals' need. Using the learning from a trial in the Taunton area, more integrated support services should be adopted across the county, centred specifically on the needs of the individual and developing and maintaining independence.

### **Action 9 – Joining up of support services**

Integrated health and social care will be developed across the county to support people to regain and maintain their independence for as long as possible. Examples of action include extending the Integrated Support Service across the county.

# Appendix 1

## Criteria for prioritisation

The criteria below have been used by the Shadow Health and Wellbeing Board to identify the priorities within the Health and Wellbeing Strategy.

Priorities for the Health and Wellbeing Strategy should:

- Be informed by the priorities identified through the Joint Strategic Needs Assessment and the views of local people and stakeholders
- Be visionary, but encompass tangible action that can be based on robust evidence of effectiveness and cost effectiveness.
- Focus on improving health and wellbeing overall but making improvements faster for groups and communities that experience poorer health and quality of life
- Focus on priorities that require collaboration across organisations
- Reflect the remit of the Board, for example, to improve health and wellbeing and support the development of greater integration of services across organisations
- Reflect the outcomes as set out in the national outcomes frameworks but not be driven by them