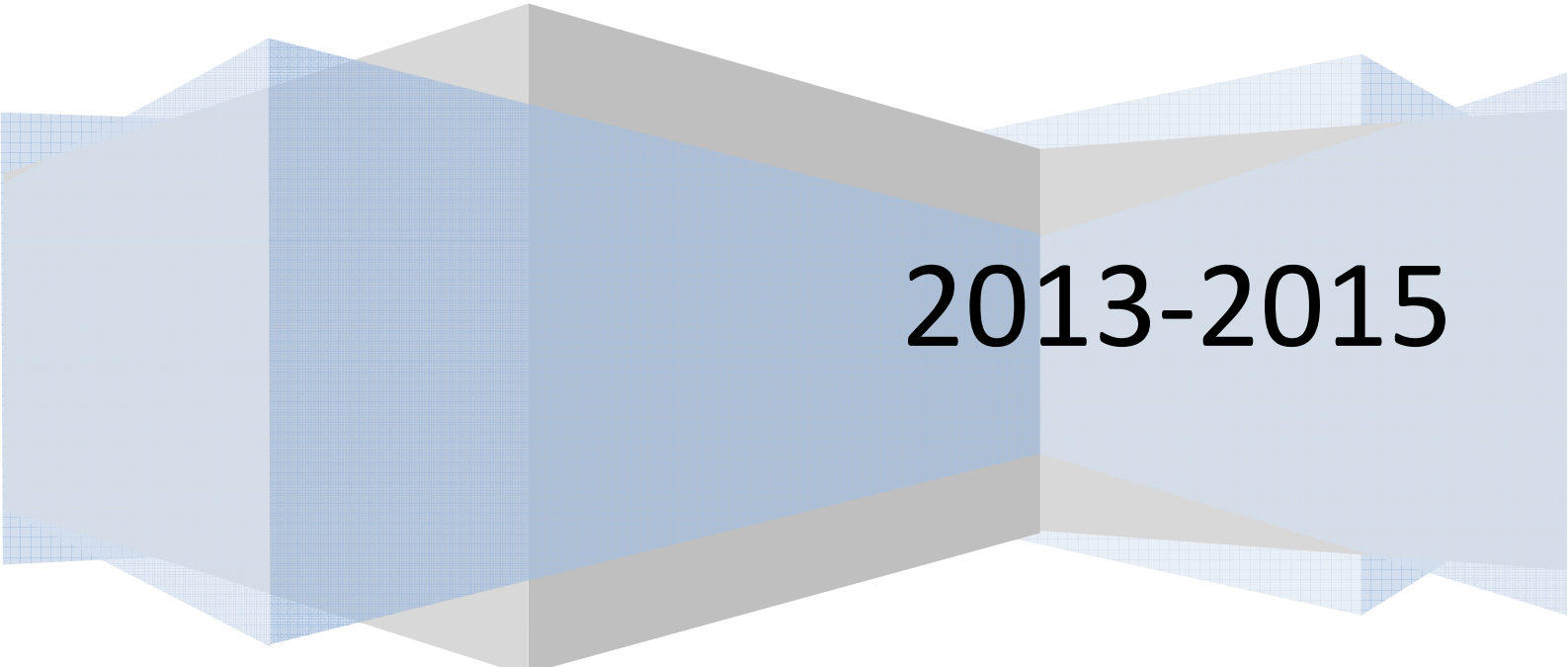


West Berkshire
Health and Wellbeing
Strategy
(Consultation Draft)



2013-2015

Foreword to be added after consultation

Signed by

Health Wellbeing Board Chair Graham Jones

Health Wellbeing Board Vice Chair Alex Anderson

Working Together Towards a Healthier West Berkshire

Introduction

We, the Health and Wellbeing Board, believe that everyone has the right to enjoy good health. We want people in West Berkshire to live in a vibrant and sustainable community and live as healthy and independent lives as they can. We want our health and care services to be integrated, high quality and safe. When you need to use those services we want you to have a positive experience of care.

We continue to make significant investment in improving health and wellbeing in West Berkshire and as a result we have a lot to be proud of.

Fewer people are dying from cancer and heart disease. We are screening more people each year for cardiovascular disease with the aim of helping them to reduce their future risk and more people are being supported to remain independent for longer. However, there are significant health inequalities across West Berkshire with approximately 11 years difference in life expectancy at birth between our most affluent and our least affluent communities. Increasing numbers of people in West Berkshire are overweight or obese and we need to increase the daily level of physical activity of our children to reduce the risk of them becoming overweight adults in the future.

Compared to national and local comparators we also have significantly more vulnerable adults with a physical or learning disability or mental illness that affects their ability to function and live independently requiring support or care.

The biggest challenge to West Berkshire is the increasing ageing population. It is projected that the numbers of older people with complex physical and mental health problems (for example dementia) and increased social care requirements will increase along with the number of ageing carers and the societal costs of supporting them. Therefore, primary prevention to help older people maintain positive social engagement, good physical health and mental wellbeing is crucial.

Governance of the Health and Wellbeing Strategy

The West Berkshire Partnership's second Sustainable Community Strategy entitled "A Breath of Fresh Air" sets out the local vision of creating a thriving and vibrant community that brings together the best of the urban and rural character of the West Berkshire District.

In line with the “Breath of Fresh Air”, the Health and Wellbeing Strategy sets out how the Health and Wellbeing Board will provide leadership to the local health and social care system, through working collaboratively. The Health and Wellbeing Board has also adopted a structure which will enable it to work with the West Berkshire Partnership and its sub partnerships, where required, in addressing some of the wider determinants that influence health and wellbeing.

The Health and Wellbeing Strategy will seek to identify the most vulnerable individuals and groups with the poorest health outcomes and target those to provide the appropriate support to improve their life chances. Addressing the priorities for collective action in this way will enable those areas of highest need to be targeted and real benefits delivered for the people of West Berkshire.

The Health and Wellbeing Vision for West Berkshire:

“We aim to add years to life and life to years for the residents of West Berkshire”

We, the Health and Wellbeing Board, believe that by creating a shared vision for what success would look like will enable partners to be able to commit to making the best use of public money by working in new ways and sharing resources, such as finance, people, buildings and information.

How will this be accomplished?

- Through tackling unacceptable inequalities in health across West Berkshire
- By reducing social exclusion and working together to promote more independence
- By addressing underlying environmental and economic determinants of health
- Through endeavoring to get the best value from our resources.
- Through investing in prevention and early intervention.
- By ensuring that everything we do will be informed by evidence of effectiveness
- By delivering cost effective health and care services as close to people’s homes as is possible.

Did you know? Three quarters of West Berkshire is designated as an area of outstanding natural beauty and is reported to be one of the reasons why many people choose to live here. The potential health benefits of outdoor play in natural settings are noteworthy. These health benefits include: positive attitudes towards physical activity; activation of higher cognitive processes and healthy brain development; and promotion of improved health and wellbeing throughout the life course.

This Health and Wellbeing strategy provides a bridge between a vast array of plans produced by the health and social care system. It aims to add value to the business planning process of both local health, social care and third sector organisations by taking a long term view and addressing cross cutting issues that influence the health and wellbeing of West Berkshire residents.

West Berkshire's Health and Wellbeing Board will work to achieve this vision by collectively working to prolong life expectancy whilst maintaining a high quality of life in later years, through promoting healthier lifestyles and positive mental health throughout the life course. They will work together to ensure the highest possible standards of health and social care service provision.

In addition they will focus on the wider determinants of health and wellbeing to sustain thriving and supportive communities, focusing activities on key settings for health, such as schools, workplaces, health and care establishments and to support programmes through sustainable development, ensuring access to services through transport and opportunities to walk and cycle. Our strategy is grounded in a firm understanding of our Joint Strategic Needs Assessment (JSNA), which details West Berkshire's population and its needs, national and local drivers, service users' and carers' views, expert opinion and the evidence base for intervention. As local leaders we have worked together to understand and agree the priorities for collective action, providing support universally and to the most vulnerable individuals and groups with those with the greatest need.

Did you know? There is a smaller proportion of people from Black, Minority or Ethnic groups in West Berkshire compared to national averages though these groups still account for 11,000 residents. There is a small but significant Gypsy, Roma, Traveller population and high level of health inequality between this group and the general population is well known.

We will work together to effectively use our joint resources.

Both the local NHS and Council are facing a highly challenging financial position. There are significant budgetary pressures while operating in an environment of rising customer expectations and demand for higher quality services. Demand for health and social care services are expected to continue to increase due to demographic changes and increases in illness related to lifestyle risk factors.

When serving and caring for an ageing population, with rising numbers of people living with a long-term conditions, it is crucial that health and social care work closely together. In order for the Health and Wellbeing Board to influence the use of resources within its area, it needs to be aware of the totality of the resources used to deliver health and social care in the local economy. This is not just information in regard to statutory organisations but also information as to the extent of the voluntary sector and social capital.

Understanding this information and its' implications supports the Health and Wellbeing Board in a number of ways, including making appropriate recommendations to the local authority and/or the Newbury and District and North and West Reading Clinical Commissioning Groups (CCGs). We will also be able to better understand the resources that can be called upon to contribute to the delivery of the Health and Wellbeing Strategy.

Given increasing constraints on resources, during the life period of this Strategy the Health and Wellbeing Board will develop a deeper understanding of the totality of the resources available to them within the scope and influence of the Board. The Board will also explore opportunities to maximise resources in order to promote effective outcome based commissioning through integrated working.

This will be achieved by conducting the following assessments:

- An assessment of the current commissioning activity that would be regarded as joint or integrated between health and social care,
- An assessment of those areas with greatest potential to benefit (in terms of user experience & business efficiency) from an integrated or joint commissioning approach
- An assessment of the extent to which the Local Authority and CCG commissioning support arrangements might be joined up

A formal sub group of Health and Wellbeing Board will be established as a forum for strategic commissioning and to oversee the above assessments.

We will provide leadership to the West Berkshire Health and Social Care Delivery System

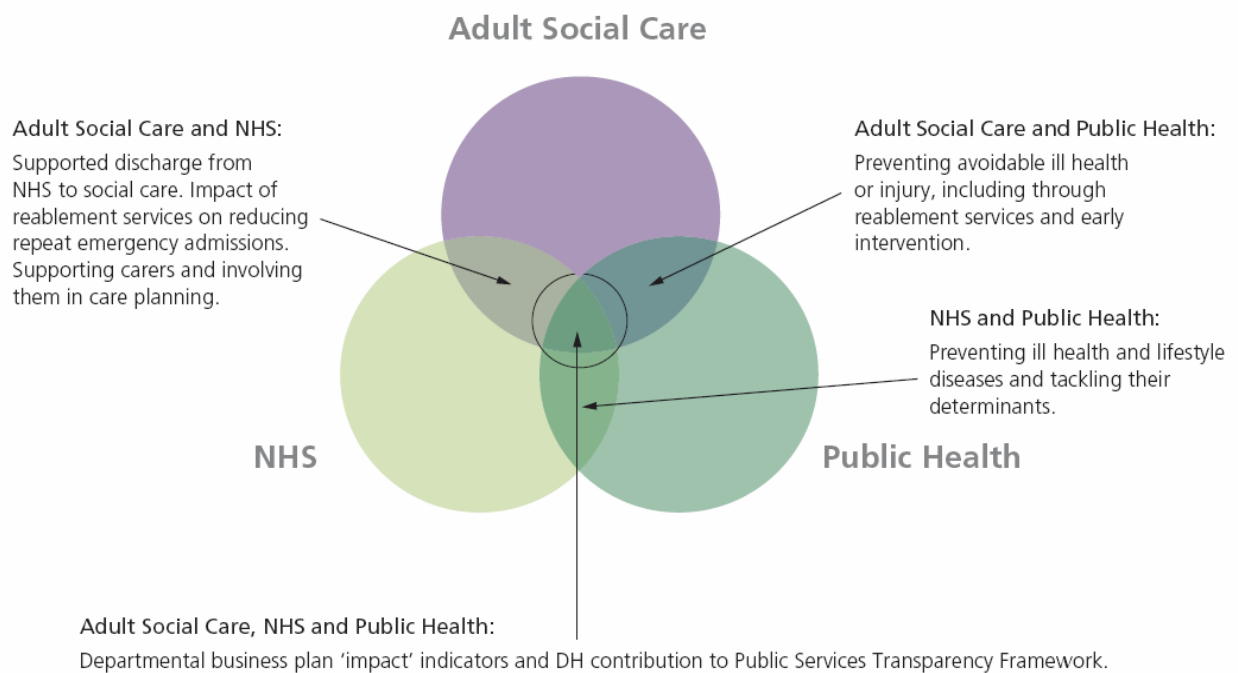
A fundamental function of the Health and Wellbeing Board is to be responsible for leading the transformation of local health and social care services to achieve improved population health and wellbeing for the people of West Berkshire and a collective focus of improving services for the whole community and individuals for the long term. The membership of the Health and Wellbeing Board reflects the government's ambitions for health and wellbeing by ensuring that CCGs, Local Authorities and Healthwatch jointly lead the local health and care system, in collaboration with their partners and communities.

As a Joint Health and Wellbeing Board we commit to the following:

- We will ensure all our hospital providers are monitored and continue to provide safe, effective and efficient care in key areas.
- We will work collaboratively with neighbouring authorities and partners to ensure effective use of resource and sharing of best practice
- In light of our rural community, we will review and address the geographical barriers to accessing health and social care support
- We will ensure that we effectively safeguard the most vulnerable adults in our district.
- We will ensure that we effectively safeguard the most vulnerable children in our district. Enhancing service provision, focusing child protection resources on those children most at risk and providing high quality, evidenced based preventative support.
- We will regularly check that people using health and social care services and their carers are satisfied with their experience of care and support services.
- We will regularly check that carers feel that they are respected as equal partners throughout the care process.
- We will regularly check that any move to a residential or nursing home has been a positive experience
- We will enable local people to be more involved in the health and social services provided in the district.
- We will regularly check on the progress being made in the implementation of parish plans. We will support local communities to harness their community assets to address the needs they have identified.

In understanding how best to apportion resource to improve health and wellbeing and reduce inequalities, this Health and Wellbeing strategy considers all the outcomes frameworks. There are currently three Department of Health Outcomes Frameworks: Public Health, Adult Social Care and NHS. These are separate frameworks to make sure that lines of accountability are focussed, but they have been designed to work together, as the diagram below sets out.

A new framework for Children’s Health and Wellbeing Outcomes is in development and a draft of the Commissioning Outcomes Framework (COF) came out for consultation early in 2012.



Adding Years to Life And Life to Years

Our Priorities

Health

Addressing childhood obesity in the Primary School Phase

Supporting those over 40 years old to address lifestyle choices detrimental to health

Promoting independence and supporting older people to manage their long term conditions

Wellbeing

Giving every child the best start in life

Supporting a vibrant district

What do we know about children and young people in West Berkshire?

In West Berkshire approximately 2,000 babies are born each year. The mothers of these babies tend to be older than the national average with fewer younger new mothers giving birth.

*The health and wellbeing of children in West Berkshire is generally good but there is variation within the district. One in ten children lives in poverty and there are particular groups which are more vulnerable. **MORE DETAIL HERE***

*Each year the weight and height of reception and year 6 children is measured. The proportion of four to five year old children in West Berkshire who are a healthy weight (80%) is significantly higher than the national average (76%) and comparable to the regional average (78%). **MORE DETAIL HERE ON OVERWEIGHT AND OBESITY***

Significantly fewer primary school children from West Berkshire walk to school than they do nationally with 43% travelling by car. By the time children are attending Secondary school, the number walking has decreased and only 5% of Secondary school children in West Berkshire cycle to school

Success in education brings many advantages. 58% of male and 63% of female children attending West Berkshire schools achieved at least five A to C grades at GCSE including English and Maths during 2011. This is comparable to the national, regional and county averages. However, as is the pattern nationally, results lowered to 49% in children for whom English was a second language and to 29% for children who were eligible for free school meals*

In order to underline the themes within the hexagons we will need to include information/data on who are the vulnerable groups – who needs to be kept safe? Who are the children and families that are vulnerable who need support? What about the universal support through the healthy child programme? What are the stats on our healthy child pop? Work and school readiness – what are the issues currently? Inequalities data. Data on emotional health and wellbeing for children and young people

Why is addressing childhood obesity a priority?

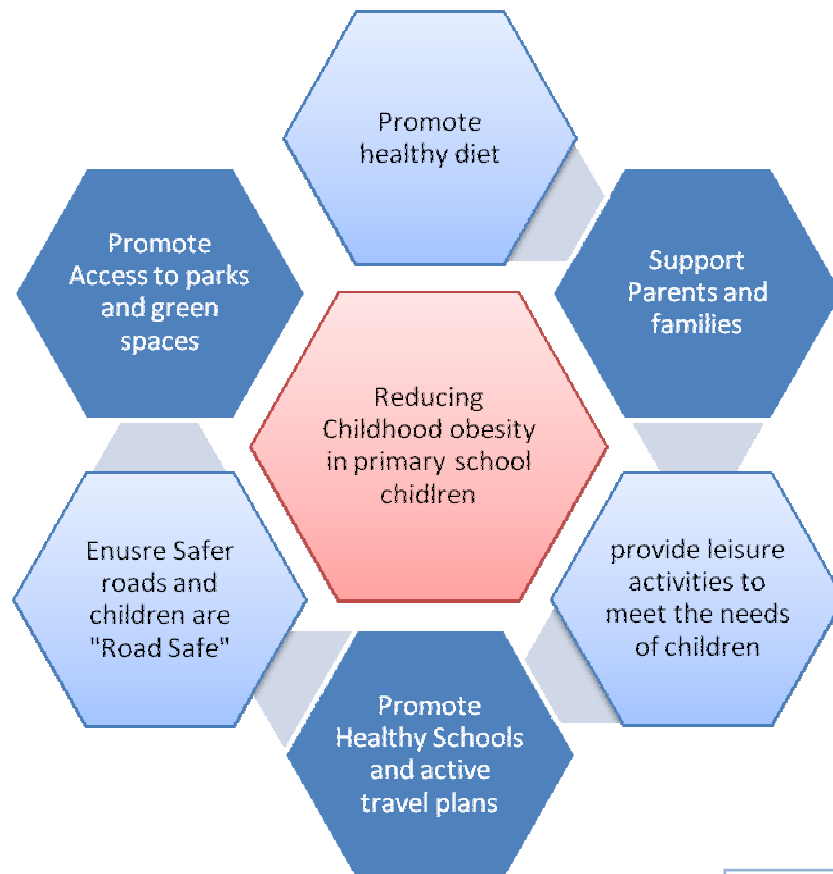
As children leave primary school in West Berkshire the positive weight advantage witnessed when they enter is lost. Children are just as likely to be overweight or obese as children from other areas.

Children who are obese are more likely to become obese adults, and this likelihood increases the heavier they are as a child and if their parents are also obese.

More health problems will be seen in the next generation of adults if more of our children are overweight or obese today. Childhood obesity is a powerful predictor of increased risk of Coronary Heart Disease (CHD) and type 2 diabetes mellitus in early adulthood.

Adult obesity is strongly associated with other conditions such as arthritis, and respiratory disorders. The links between obesity and some cancers is less well proven but there is a growing recognition of this link. Obesity is also linked to infertility and an increased risk of complications during pregnancy.

Overweight and obesity are complex and have many contributing factors on a variety of levels requiring a joined up approach if it is to be successfully addressed.



What we will do

What do we know about working aged adults in West Berkshire?

Over 3,000 people in West Berkshire are estimated to have some form of learning disability

In 2011 nearly 10,000 adults in West Berkshire were estimated to have some form of physical disability

22,000 people in West Berkshire are estimated to smoke. Locally, 33% of those people considered to be in routine and manual occupation smoke compared to 30% nationally. It is expected that these same people also drink to unhealthy levels.

By 2030 nearly 10,000 people are expected to be obese during their retirement years

42% of adults in West Berkshire are estimated to not be taking part in any form of regular physical activity

Nearly 15,000 people who are registered with GP Practices in West Berkshire are recorded as having depression, which is greater than the national and regional average

2,000 people are expected to have dementia in their old age by 2025.

Why is supporting working age adults to change lifestyle behaviours a priority?

Addressing lifestyle behaviours detrimental to health and wellbeing in working age adults will optimise good health, decrease ill health and the need to use health and social care services not only today but also in years to come. This will help to prevent the development of many long term conditions, benefiting individuals, their families and society in general.

In addition to universal provision, programmes should be targeted at populations or groups known to be at increased risk of adopting lifestyles detrimental to health and wellbeing. Many of the key lifestyle behaviours significant to the development of long term conditions are more prevalent in lower socioeconomic groups, including smoking, obesity, lack of physical activity, poor nutrition and drinking alcohol above recommended limits.

The majority of long term conditions can be prevented or the impact reduced through the modification of harmful lifestyle behaviours.

What we will do



What do we know about older people in West Berkshire?

The West Berkshire population is older than the national average and one that will continue to age more rapidly.

There is a predicted rise in the number of older people who will suffer from Diabetes, Dementia and Depression

There is a predicted rise in the number of older people who are unable to perform at least one domestic or self-care activity on their own

Just over 2,000 people were diagnosed with cancer in 2009

The modelled prevalence of Cardiovascular Disease, Respiratory conditions, Diabetes, and Chronic Kidney Disease show us that prevalence is higher in West Berkshire

The number of older people with learning disabilities is expected to rise

2,000 people over 65 years old are estimated to have depression

Over 6000 households in West Berkshire LA are considered to be fuel poor. Fuel poverty damages the health of those living in cold homes and affects their quality of life. The old, children and those who are disabled or have a long-term illness are especially vulnerable.

Why is promoting independence and supporting older people to manage their long term conditions a priority?

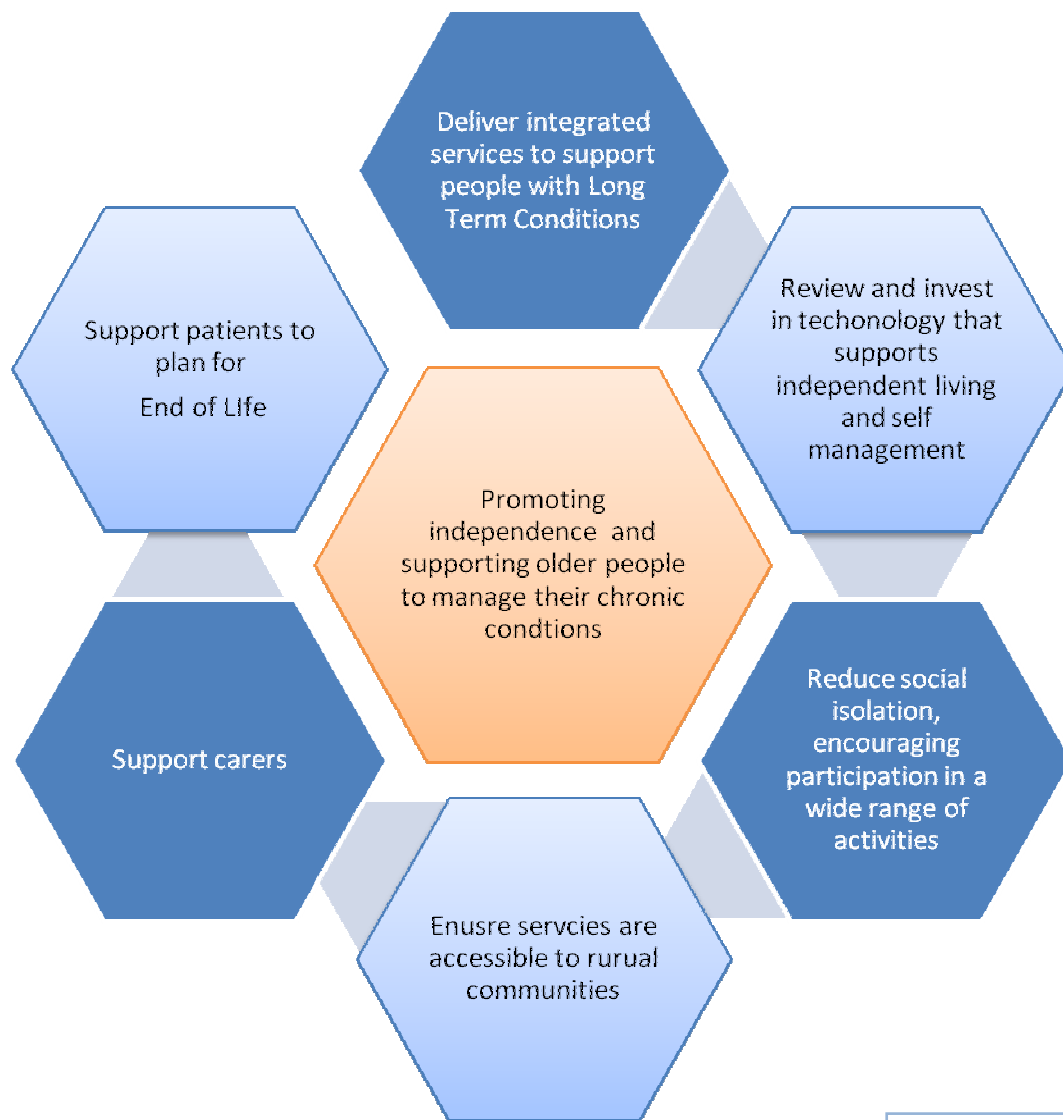
People aged over 75 stay one and a half times longer in hospital than the average for all age admissions and people with a diagnosis of dementia stay on average four times longer

The numbers of people requiring adult social care including services delivered in the community, and requiring residential or nursing home care in West Berkshire is predicted to increase at a more dramatic rate than the national increase

Groups in particular need include older people living alone and those who are carers. In addition, there is predicted to be an increase in age-associated long term conditions. This includes a rise in the number of people with dementia and poor mental health in older people as well as in the number of older people with learning disabilities

To improve health and wellbeing, health and social care services need to work together to be effective enough to support people and their carers.

By reducing barriers to increased levels of physical activity, mental wellbeing and social engagement particularly among excluded groups of older people, older people will experience a better quality of life.



What we will do

Did you know?.....A Long Term Condition is a condition that cannot be cured but can be managed through addressing lifestyle behaviours detrimental to health such as smoking, obesity, lack of exercise and drinking alcohol above recommended limits.

Many of the key health behaviours significant to the development of chronic disease are more prevalent in lower socioeconomic groups. In addition to universal provision, programmes should be targeted at populations or groups known be at increased risk of adopting lifestyles detrimental to health and wellbeing.

Give every child the Best Start in Life

Ensuring there is a focus on giving every child the best start in life is crucial to reducing health inequalities. The foundation for virtually every aspect of human development - physical, intellectual and emotional - are laid in early childhood. Where positive and effective early foundations are lacking, later interventions are less effective. Young people are among the more vulnerable in society. As well as being the most susceptible to negative influences, they also have the greatest opportunities for long term improvement of health and wellbeing.

What we will do



Promote a vibrant district

Social capital describes the links that bind and connect individuals and communities. This is important as it provides a source of resilience, a buffer against the risks of poor health. The extent of people’s participation in their communities, how safe they feel and the added control this brings has the potential to positively contribute to their psycho-social wellbeing.

Given the rural nature of parts of West Berkshire, access to services can be cut-off to some of the groups that may need it most such as the elderly, those without access to transport, and the disabled. We can also see that the broad picture of affluence can mask pockets of deprivation within the local area with people living in areas of deprivation more likely to be unemployed and in receipt of benefits. Benefit data suggest that these people are also more likely to be disabled and/or older people and, therefore have increased need

What we will do



Do we need some more description of West Berks including who are the most need groups?

Next steps

Action plans with specific objectives, measurable outcomes and timescales

Identification of other strategies and action plans that link with PH outcomes and contribute to the priorities.

Establishment of subgroups to drive implementation of programmes and projects and monitor progress.

Appendices – data supporting the various priorities.

Supporting