

### Joint Local Health and Wellbeing Strategy

**Please note,** this is a draft version subject to consultation feedback, final proofing and accessibility checks





# DRAFT Contents

Summary of our strategy	3
Foreword	5
Our shared vision	7
Our understanding of what makes us healthy and happy	8
Our current position in West Northamptonshire	11
Our approach	15
Our ambitions	19
Our governance - making things happen	30
Our performance framework	31
Members of the West Northamptonshire	32
Health and Wellbeing Board	32

### Summary of our strategy

### Our shared vision

We want to work better together to create a place where people are active, confident and enjoy good health and wellbeing. A West Northamptonshire where people can see and feel a bright future for quality support and services when they need help.

#### Across the life course we are committed to



Starting Well



**Living Well** 



**Ageing Well** 

### Our approach

- **1.Prevention as a priority**
- 2. Tackling health and wellbeing inequalities
- 3. The importance of 'Place' and delivery through our Local Area Partnerships and Local Area Forums
- 4.An evidence-based and community insight led approach
- 5.Co-production

# Summary of our strategy

Ambition	Key outcomes	Available system priority metrics
Best start in life	<ul> <li>Women are healthy and well during and after pregnancy.</li> <li>Children are healthy from birth.</li> <li>All children grow and develop well so they are ready and equipped to start school.</li> <li>Children in care are healthy, well and ready for adulthood.</li> </ul>	% achieving good level of development at age 2-3
Access to best education and learning	<ul> <li>Children and young people perform well at all key stages.</li> <li>SEND education meets the needs of children locally.</li> <li>Schools serve all children and young people well and nobody misses out on learning.</li> <li>Adults have access to learning opportunities which supports employment and life skills.</li> </ul>	Average attainment 8 score of all pupils % of SEND children electively home educate Rate of permanent exclusions (per 100 pupils)
Opportunities to be fit, well and independent	<ul> <li>Adults are healthy and active, and enjoy good mental health.</li> <li>People experience less ill-health and disability due to lung and heart diseases.</li> </ul>	<ul> <li>9% of adults currently smoke' (APS)</li> <li>% Adults classified as overweight or obese</li> <li>Adolescent self-reported wellbeing (SHEU)</li> <li>Standardised rate of emergency admissions due to COPD</li> </ul>
Employment that keeps them and their families out of poverty	More adults are employed and receive a 'living wage'. Adults and families take up benefits they are entitled to.	Gap in employment for those in touch with secondary mental health services
Good housing in places which are clean and green	Good access to affordable, safe, quality, accommodation and security of tenure. The local environment is clean and green with lower carbon emissions.	Number of households owed a prevention duty under Homelessness Reduction Act
People feeling safe in their own homes and when out and about	People are safe in their homes, on public transport and in public places. Children and young people are safe and protected from harm.	Number of re-referrals to MARAC for children experiencing domestic abuse
Connected to their families and friends	<ul> <li>People feel well connected to family, friends and their community.</li> <li>Connections are helped by public transport and technology.</li> <li>Improving outcomes for those who are socially excluded.</li> </ul>	% adult social care users with as much social contact as they like
The chance for a fresh start when things go wrong	Homeless people and ex-offenders are helped back into society. People have good access to support for addictive behaviour and take it up.	Number of emergency hospital admission for those with no fixed abode
Access to health and social care	<ul> <li>Timely access to all health and social care services when they need across life course from conception to end of life.</li> <li>People are supported to live at places of their residence and only spend time in hospital to meet medical needs.</li> <li>Services to prevent illness (all health screening and vaccinations) are easy to access with quality service provision.</li> <li>People are treated with dignity and respect in all care provisions including end of life.</li> </ul>	<ul> <li>% Cancer diagnosed at stage1/2</li> <li>% of people discharged from hospital to their usual place of residence</li> <li>Rate of emergency department attendances for falls in those aged 65+</li> <li>% eligible looked after children and adul with Learning disability/Severe mental illness receive annual health check</li> </ul>
To be accepted and valued simply for who they are	<ul> <li>Diversity is respected and celebrated.</li> <li>People feel they are a valued part of their community and are not isolated or lonely.</li> <li>People are treated with dignity and respect.</li> </ul>	Metrics to be developed

### Foreword

I am delighted to introduce the West Northamptonshire Joint Local Health and Wellbeing Strategy for 2023 to 2028. This challenging new plan sets out how, in West Northamptonshire, we will work together as a partnership and with residents to improve health outcomes for local people.

We do this at a time of significant pressures on public services post pandemic, and on people nationally due to unprecedented cost of living challenges, exacerbated by the conflict in Ukraine and the impact of climate change.

In 2022 changes to the health system architecture and leadership led to the development of 'Integrated Care Northamptonshire' a system wide strategy for the county and a fundamental shift in health and care organisation.

An Integrated Care Board (ICB) replaced the former Clinical Commissioning Group and both West and North Northamptonshire Councils are key partners on this board alongside local healthcare leaders. 'Integrated Care Northamptonshire' has been developed around 10 ambitions, to enable people living and working in the area to Live Their Best Life.

The Health and Wellbeing Board will play a significant role in the delivery of 'Integrated Care Northamptonshire' over the next 5 years. These ambitions are the starting point for us as we shape our own Joint Local Health and Wellbeing Strategy (JLHWS).

This document explains how the Health and Wellbeing Board intends to play its part to improve the wider determinants of health in West Northamptonshire; and how we will do this by engaging and enabling our local communities through a 'place' based approach.

This is our health and wellbeing commitment to the people of West Northamptonshire for the next five years. We will regularly review and report back on our progress and develop an open two-way dialogue with our local communities to ensure we deliver what is important to residents. It is intentionally ambitious to ensure we can turn the tide of growing demand on health and care services enabling them to have the space to improve.

Our starting point is prevention, through education and by empowering local people to take responsibility for their own good health and wellbeing. To achieve this, we are committed to tackling health inequalities in some of our communities.

Our mission is to ensure the people of West Northamptonshire are supported and able to live their best life. I hope you agree that this exciting strategy will help us get there.



**Cllr Matt Golby,** Cabinet Member for Adult Social Care and Public Health

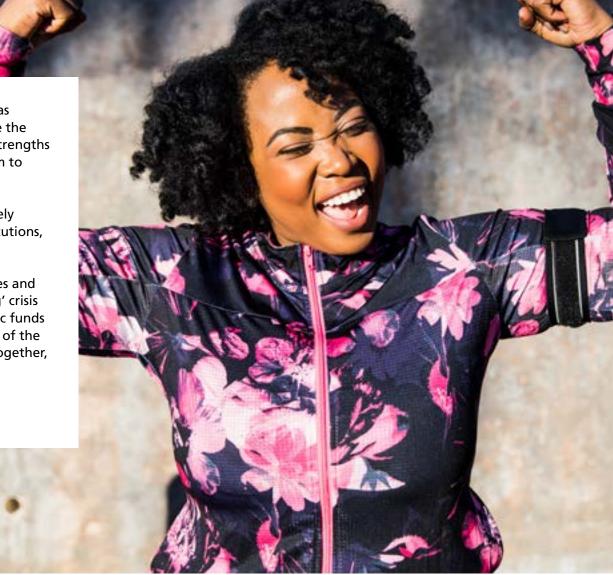
# Introduction



West Northamptonshire is a great place to live but it is also a place that has challenges and like all areas, faces some uncertainty. Despite this we have the opportunity and potential to create a bright future, and we will use our strengths to improve the lives of people who live and work in the area helping them to 'Live their Best Life'.

Together, we can shape our own journey and destination by working closely with our NHS, primary care, emergency services, local businesses and institutions, voluntary sector and our community partners.

The pandemic put an enormous pressure upon services and local businesses and has left a challenging personal legacy for our residents. The 'cost of living' crisis adds to this challenge nationally and locally; influencing the level of public funds available and the pressures faced by local people in their daily lives. Some of the challenges we face require changes in behaviour or in the way we work together, some will require considerable national and local investment.



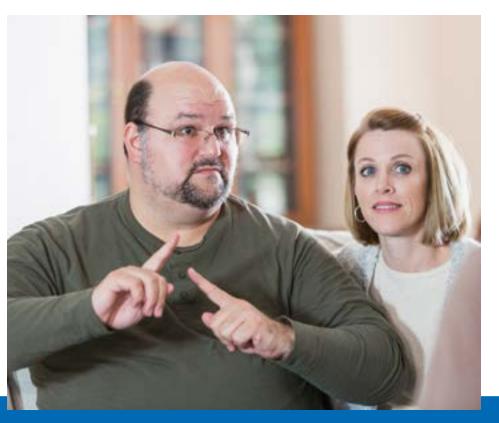
### Our shared vision

# Together, with our partners, we share a vision for health and wellbeing:

We want to work better together to create a place where people are active, confident and enjoy good health and wellbeing. A West Northamptonshire where people can see and feel a bright future for themselves and their families, take personal responsibility for their own health, but can reach out to quality support and services when they need help.

Through Integrated Care Northamptonshire we have agreed 10 challenging ambitions to enable local people to Live Their Best Life. Our West Northamptonshire Joint Health and Wellbeing Strategy brings vision this to life at a place level.

Many of these ambitions require us to address the wider determinants of health and this is where all partner organisations in West Northamptonshire can add the greatest value.



Our 10 ambitions reflect what local people need to have or be to help them Live their Best Life.

#### These are:

- The best start in life
- Access to the best available education and learning
- Opportunity to be fit, well and independent
- Employ that keeps them and their families out of poverty
- Good housing in places which are clean and green

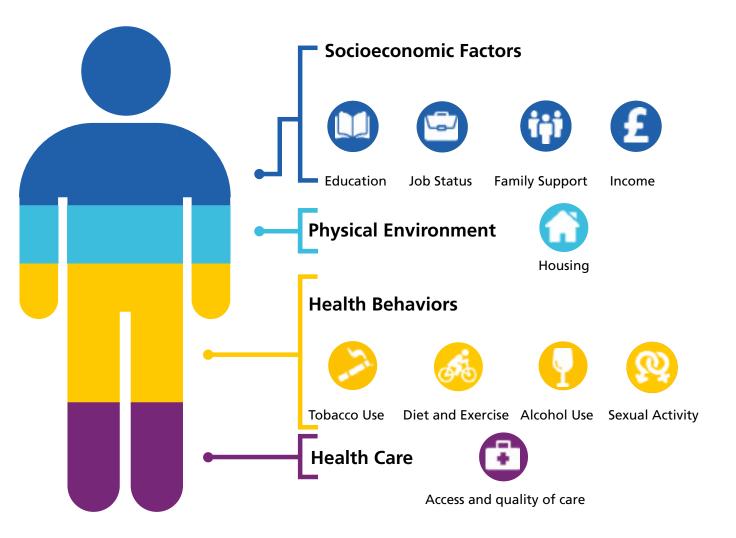
- Safe in their homes and when out and about
- Connected to their friends and family
- The chance of a fresh start when things go wrong
- Access to health and social care when they need it
- Accepted and valued for who they are

### Our understanding of what makes us healthy and happy

Impacts of the wider determinants of health - Robert Wood Johnson model

Health and wellbeing is a complex interaction between individual behaviours (such as lifestyle including smoking, diet and exercise, alcohol use and sexual activity), the social and economic factors (such as education, job status, family support, income), the physical environment (where we live) and access to quality healthcare.

The diagram shows that the physical environment contributes to 10% of health outcomes; healthcare contributes to 20%; health behaviours 30% and social and economic factors 40%. Therefore, a holistic approach to health and wellbeing is needed, which takes all of these characteristics into account and encourages people to take charge of their own health and wellbeing. If we focus solely on healthcare it will not address all health problems, and we need to work together as a system to address all of these factors, with a greater focus on the wider determinants of health, because health starts long before illness, it starts in our homes, schools and jobs.



# **Drivers of inequalities**

The overlapping dimensions of health inequalities

Health inequalities are determined by social circumstances largely beyond an individual's control. The Venn diagram shows the dimensions of health inequalities and how these overlap. Many people fall into more than one of these groups and experience multiple disadvantage. These are; socioeconomic groups and deprivation i.e. low income / unemployment, protected characteristics in the Equality Duty i.e. age, sex, religion, geography i.e. urban / rural and inclusion health and vulnerable groups i.e. homeless people, sex workers.

Inclusion health and vulnerable groups e.g. homeless people, Gypsy, Roma and Travellers, sex workers, vunerable migrants, people who leave prison Socioeconomic groups and deprivation e.g. unemployed, low income, deprived areas

> Protected characteristics in the Equality Duty e.g. age, sex, religion, sexual orientation, disability, pregnancy and maternity

Geography e.g. urban, rural

### DRAFT Key factors for health and happiness

There are a number of key factors that impact on a persons health and happiness as highlighted by Marmot and recognised in the 10 keys to happiness below. These are:



**Giving** Do kind things for others



**Relating** Connect with people



**Exercising** Take care of your body



Awareness Live life mindfully



Trying out Keep learning new things



**Direction** Have goals to look forward to



**Resilience** Find ways to bounce back



**Emotions** Look for what's good



Acceptance Be comfortable with who you are



Meaning Be part of something bigger

Credit source: Action for happiness (www.actionforhappiness.org)

Fair society, healthy lives: the Marmot Review: strategic review of health inequalities in England post-2010. Available from: www.gov.uk/ research-for-development-outputs/fair-society-healthy-lives-the-marmot-review-strategic-review-of-healthinequalities-in-england-post-2010

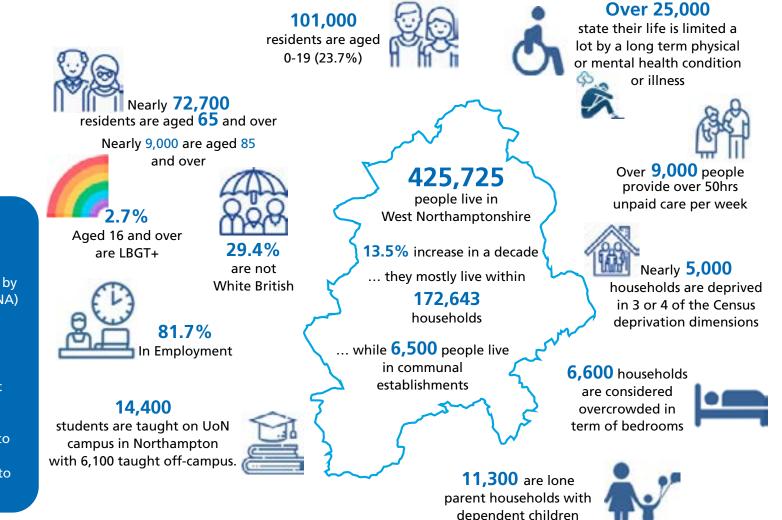
Joint Local Health and Wellbeing Strategy 2023-2028

### Our current position in West Northamptonshire

The diagram (right) explains the population of West Northamptonshire and highlights a number of key statistics, including 6,600 households are considered overcrowded in terms of bedrooms, 11,3000 are lone parents with dependent children, 81.7% are in employment and nearly 101,000 of our residents are aged between 0 to19.

# Key health challenges that we face

- Our key health challenges are informed by our joint strategic needs assessment (JSNA) and supporting themed fact sheets.
   (Link to JSNA summary and fact sheet)
- Social determinants and poverty set a pattern of poor lifestyle behaviours that compound poor health.
- We must take a preventative approach to poor health and tackle the social determinants whilst supporting people to have positive behaviours.



# Health and Wellbeing in West Northamptonshire

Life course challenges in West Northamptonshire

This page sets out the challenges we face through the life course and also the difference in inequalities within our communities in West Northamptonshire.

#### Start Well

4,647 babies were born in 2021.

12.3% of mothers smoked at the time of birth in 2020/21. This is worse than the England average.

- The population of West Northamptonshire was 425,700 in 2021.
- 72% of children achieved a good level of development at the end of reception class in 2019.

14% of children aged under 16 lived-in lowincome families in 2020/21. This is better than the England average.

21% of children in reception class were overweight or obese in 2019/20. This is better than the England average.\*

30% of children in Year 6 were overweight or obese in 2019/20. This is better than the England average.\*

73% of young people gained a standard pass (4) in English and Maths GCSEs in 2021.

The Chlamydia detection rate was 1,417 per 100,000 in 15- to 24-year-olds in 2020 This is below the national target range.

There were 10 pregnancies in females aged under 18 per 1,000 girls aged 15 to 17, in 2020. This is lower than the England average.

\* Please note that figures on childhood excess weight should be interpreted with caution due to low 2019/20 NCMP participation.

#### Live Well

A 2018 based projection estimated there were 170,103 households in West Northamptonshire in 2021.

The average salary (persons) in 2020 was £32,467.

This was an increase of 2% compared to 2019.

78% of adults were employed in 2020/21. This is similar to the England average.

9% of households experienced fuel poverty in 2018.

There were 374 new sexually transmitted infections per 100,000 population in 2020. This is lower than the England average.

63% of adults were physically active in 2020/21. This is worse than the England average.

52% of the population aged 16+ ate their "5-a-day" in 2019/20. This is worse than the England average.

69% of adults were overweight or obese in 2020/21. This is worse than the England average.

There were 467 alcohol related hospital admissions per 100,000 population in 2020/21. This is similar to the England average.

15% of adults smoked in 2019. This is similar to the England average.

There were 8 suicides per 100,000 population in 2018-2020. This is lower than the England average.

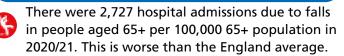
- There were 297 hospital admissions for self-harm per 100,000 population in 2020/21. This is worse than the England average.
- There were 3 deaths from drug misuse per 100,000 population in 2018-2020. This is lower than the England average.
- 42 people were killed or seriously injured on roads per 100,000 population in the 2016-2018. This is similar to the England average.

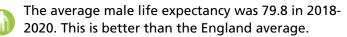
There were 26 deaths from preventable cardiovascular diseases per 100,000 population in 2017-2019. This is similar to the England average.

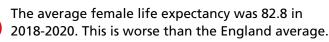
There were 20 deaths in under 75s from preventable respiratory diseases per 100,000 population in 2017-2019. This is similar to the England average.

There were 54 deaths from preventable cancers per 100,000 population in 2017-2019. This is similar to the England average.

#### Age Well





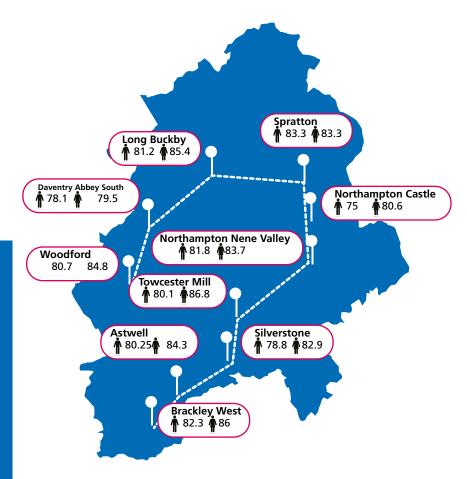


Ô

### Health inequalities in West Northamptonshire

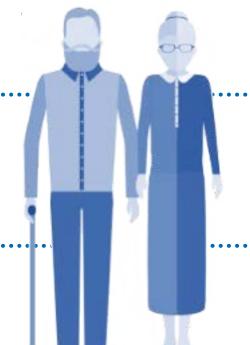
This diagram will be developed based on data that is currently being finalised.

### Life expectancy in West Northamptonshire



Average life expectancy at birth for men is 79.8

Men living in the more affluent 20% of the West can expect to live 9 years longer than those in the 20% most deprived areas



Average life expectancy at birth for women is 82.8

Women living in the more affluent 20% of the West can expect to live 8 years longer than those in the 20% most deprived areas

Following a 'bus route' in each unitary, demonstrates that communities that only live a few miles apart can have stark differences in life expectancy. Healthy life expectancy (the average number of years a person would expect to live in good health) for men and women in Northamptonshire ranges between 63 and 65 years of age meaning that most people will start their retirement with some degree of poor health.

Source Data : Fingertips 2018-2020

### Our approach

Through our services and policies, we can make the greatest impact within the partnership by focussing our efforts on improving outcomes within the wider determinants of health including; housing, air quality, community cohesion and social improvements in places and communities which we live and work for example and critically social improvements in the places and communities in which we live and work.

#### Five key approaches will shape our strategic health and wellbeing ambitions.

#### 1 - Prevention as a priority

National and local resources to support health and wellbeing are critically stretched because of high demand often due to lifestyle and environmental pressures on people of all ages. Preventing poor health and wellbeing is more important than ever.

Local data suggests that there is more we can do on prevention in West Northamptonshire – supporting people to make good lifestyle choices, picking problems up earlier and creating local environmental conditions that support good health; thereby taking pressure off primary and acute services.

Generally, people want to be in control of their lives and not rely on services to put things right. We will support them by providing help in preventing health problems and enabling people to manage their lives in a way that can lead to a happy, healthier future. We are also committed to ensuring local communities are great places to live with a culture of wellbeing.

The Health and Wellbeing Board is well placed to support preventative interventions through; housing and environment, children's and adults, leisure and cultural services, highways and footways and community safety.

#### 2 -Tackling health and wellbeing inequalities

We recognise that there are people in our communities who experience greater health and care challenges or are not always visible to the services that can support them.

Health inequalities are preventable, unfair, and unjust differences in health between groups, populations, or individuals. These arise from unequal social, economic, and environmental conditions which in turn, can determine the risk of people getting ill, their ability to prevent sickness, or their chance to get treatment when health or care needs occur.

In short, inequalities mean that some people do not have the same chances to be healthy. The disproportionate impact of COVID further highlighted long-standing health inequalities.

We know from data and feedback where these inequalities occur locally and through this strategy, we will target those most in need or seldom heard.

### Our approach

#### 3-The importance of 'place' and local assets

We need to take very local action to address specific problems in some communities that prevent good health and wellbeing. To do this we need to work side by side with local people and community leaders. Our place model for West Northamptonshire includes the development of nine Local Area Partnerships (LAPs) supported by two Health and Wellbeing Forums.

The model is reliant on all partners working together to identify local priorities, improve outcomes and reduce inequalities for residents and their communities.

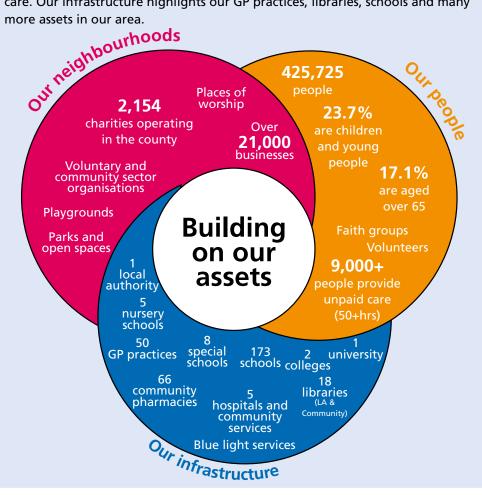
The initial functions of the Local Area Partnerships are to:

- represent local areas and give a voice to residents, translating strategy into local action
- empower residents to co-produce new services and solutions locally with partners
- contribute to system-wide priorities by utilising evidence-based information and local insight from frontline services and communities
- empower local leaders to take accountability for local action.

Each Local Area Partnership has a core membership that brings together leaders who work closely within their community and understand the local landscape.

For more information about the Place delivery structures including our Health and Wellbeing Forums and the LAPs please see the LINK here.

As shown in the diagram (below), our assets are made up of our neighbourhoods, people and infrastructure. For example our neighbourhoods include places of workshop, charities, voluntary and community sector organisations and playgrounds to name a few. Our people show the number of people living in West Northants and the population of children, young people, over 65's and those providing unpaid care. Our infrastructure highlights our GP practices, libraries, schools and many more assets in our area.





### Our approach



### Our approach

# 4 - An evidence-based and community insight led approach

The Joint Strategic Needs Assessment (JSNA) is a summary of data related to health and wellbeing across Northamptonshire that provides a view of local health and wellbeing information alongside national data. This data informs our priorities and performance focus. We have used this valuable resource to shape our priorities, identify where we need to improve and allocate our resources.

Enriching that knowledge, we have also taken on board insights from our local communities. These may be geographic communities a defined local area, for example a Local Area Partnership or Parish, or communities of interest. It can also be a cross cutting community, for example young people across West Northamptonshire. Insight from across our area has already been built into the development of this strategy and we will continue to work in this way to support its further development. We are particularly keen to build on our Well Northants asset-based model of community engagement.

The West Northamptonshire Health and Wellbeing Board values this insight from local people and has listened to a wide range of local voices including our community forums in developing this strategy. There were many common themes which have helped us to focus on what matters most locally. We will continue to listen to local voices as we roll out delivery plans and fine tune our priorities.

#### 5- Co-production

Passion for the place, experience, assets, and skills are abundant in our local communities. This is often an untapped resource when designing and commissioning services locally. Our fantastic community and voluntary sector are a critical part of our co-production and are our secret weapon locally. Co-production is a way of working were service providers and service users work together to reach a shared outcome. This approach is value driven and built on the principle that those who are affected by a service are best placed to help design it. It contributes to a sense of shared identity and purpose locally. The 'Place' approach outlined above creates the right environment for this to work well; and local insight sets the context for the creative development of services designed together.



### Our ten ambitions set out to support residents in West Northampton to 'Live Your Best Life'

Each ambition has a set of metrics which we can use to monitor our progress and are essential in ensuring that we are moving forward and delivering the ten 'Live Your Best Life' ambitions.

The metrics outlined in this performance framework have been agreed by the Integrated Care Northamptonshire Partnership as metrics we as a county will be working together to improve.

There will be many other detailed performance metrics that we will be monitoring as part of the delivery of this strategy but the performance framework outlines those metrics that are key priorities for us as a partnership and these will be reported to the West Northants Health and Wellbeing Board.





### DRAFT **Ambition 1 - The best start in life**

#### Introduction

In West Northamptonshire we are committed to give children the best start in life to grow happy and healthy, flourish and succeed in life. With the current cost of living crisis long lasting impacts of the COVID-19 pandemic, children and families are facing huge challenges to receive the support they need when they need it, leading us to pick up issues at crisis point. We want to ensure we develop an integrated support offer for families and children to meet their needs at the earliest point of identification, and enable them to access local, timely and welcoming services to prevent problems from escalating. We want to ensure we give children the best start for life to flourish and live a healthy adulthood.

#### Where we are now

- Risks of birth complications and poor health in newborn children is higher than it ought to be due to high levels of smoking and obesity in pregnancy.
- Children in care in Northamptonshire have poorer access to regular health and dental checks than other areas.
- Not enough children are starting school with the skills they need to succeed.
- There is a lack of youth provision for young people.
- Too many young people have poor mental wellbeing and this is increasing.
- The severity of poor mental health in adolescence is also increasing resulting in high rates of admission to hospital for self-harm and eating disorders.

#### What you have told us

- The community want locally based support services for families and young people.
- The community would like a 'drop in' service with tailored support for young parents.
- We want more support for children with special needs and their parents.

#### What we want to achieve

• Women are healthy and well during and after pregnancy.

...........

- Children are healthy from birth.
- All children grow and develop well so they are ready and equipped to start school.
- Children in care are healthy, well and ready for adulthood.

### (`́∖ (`́)

#### What is the inequalities focus

We need to focus on children and families in the 20% most deprived areas, children in care, young parents, children with special needs and children with long term conditions.

#### How will we measure progress?

- Reduce the % of women smoking at time of delivery.
- Increase the % of children with good level of development at age 2-3.

- How we will achieve our ambition
- We will develop a supportive, integrated and consistent offer to support women from prepregnancy stage to postnatal stage by working with the Local Maternity System prevention group and wider partners across the system.
- We will work to increase the uptake of free early education entitlement for all three and four years old. We will work with the 0-19 service to increase the integrated aged 2-2.5 reviews and expand the universal and targeted support for parents to ensure that all children are ready to start school and able to flourish and live a healthy adulthood.
- We will develop an early help universal offer to support families in need at the earliest point of identification and to prevent issues from reaching crisis point.
- We will develop the family hubs programme building on existing services and community assets and strengthen integrated services across local authority, Northamptonshire Integrated Care Board, Children Trust, and the voluntary community sector to improve outcomes for children and young people across West Northants.
- We will increase access to specialist care and support services for at risk children and their parents.



### Ambition 2 - Access to the best available education and learning

#### Introduction

In West Northamptonshire we are committed to giving all children access to the best education and learning. We want all children to attend safe, inclusive and aspirational schools, settings and providers. We want to all educational establishments to be at least 'Good' in all areas and to deliver an innovative, carefully planned curriculum that promotes personal development and provides a high quality, inclusive and diverse education.

We will work together to provide a robust multiagency approach to support all children and young people to have access to the best educational provision, which meets their needs and enables them to thrive and fulfil their potential. Our aim is to ensure that we provide an appropriate, high quality, sustainable Education service. In doing so, we will improve life chances of all children and young people and enable them to flourish into adulthood as valued citizens.

#### Where we are now

- 91% of primary schools are good and outstanding
- 82% of our secondary schools are good and outstanding
- Our school attendance across is 92.5%
- 5,569 incidents of suspension linked or related to 2005 pupils, and 93 permanent exclusions in 22/23
- 63% of eligible 2 year olds access free education and childcare for 2-year-olds
- 60% of 3 and 4 year olds access the free universal funded early education entitlement
- 53% of eligible 3 and 4 year olds currently accessing the universal entitlement,
- We know there is limited access to activities for young people outside of school

### Joint Local Health and Wellbeing Strategy 2023-2028

#### What you have told us

- Schools and other settings need to be more inclusive.
- Children and young people need 'safe spaces' outside of school.
- More support for children with special needs and their parents is needed.

#### What we want to achieve

.....

- Children and young people perform well at all key stages.
- SEND education meets the needs of children locally.
- Schools serve all children and young people well and nobody misses out on learning.
- Adults have access to learning opportunities which supports employment and life skills.



### What is the inequalities focus

E S

We need to focus on children and families in the 20% most deprived areas, children in care, children with special needs and children who are vulnerable or those who are disadvantaged.

# How will we measure progress?

- Increase average attainment 8 score of all pupils.
- Reduce percentage of SEND children electively home educated.

• Reduce rate of permanent exclusions (per 100 pupils).

#### How we will achieve our ambition

- We will ensure all families have access to the best education and can access educational settings to meet their children's needs.
- We will ensure that all children, including those with SEND or vulnerabilities are able to develop resilience and independence.
- We will work to Increase the uptake of free early education entitlement for all two, three and four years old.
- We will work with all education partners to identify children at risk of exclusion, and develop packages of support to enable children to remain in appropriate education settings.
- We will ork with all education partners to provide sufficient education places to meet need of all children, including those with SEND.
- We will develop a West Northants youth offer to provide children with safe spaces out of school.



### Ambition 3 - Opportunities to be fit well and independent

#### Introduction

The ability of our residents to live well, be fit and independent is hugely shaped by the circumstances in which they live their lives. To enable residents to live healthy lives, prevent ill health and promote wellbeing, people need the right information, services and support, with targeted interventions for those who need it most.

By working together as a system, and taking a life course approach, we can make sure that local people in West Northamptonshire have the opportunities to be fit, well and independent.

#### Where we are now

- Over one in four adults in West Northants are classified as physically inactive, and almost two thirds are classified as overweight or obese.
- Smoking is the single greatest risk factor for death and disability in West Northants with 11.5% of adults being current smokers.
- West Northants has growing older population and with people living in poor health.
- There are high rates of respiratory, diabetes and cardiovascular disease conditions with higher rates of mortality.
- Admissions for self-harm is higher than the England average.

#### What you have told us

- رم رئ • Bring people together by offering local activities and events to support healthier lifestyles that are affordable.
- The opportunity to receive care in our own homes to support independence is something that is important to us.
- We would like to see better communication. so we can stay informed and up to date on what is going on, as well as having a clear understanding of where to go for support.

ŕĥ

#### What we want to achieve

.....

- Adults are healthy and active, and enjoy good mental health.
- People experience less ill-health and disability due to lung and heart diseases.

#### How we will achieve our ambition

- We are developing a more joined up approach to the way we deliver services to support people to live healthy lives and improve their physical and mental health – working through the Well Northants programme to better understand what communities need and to develop targeted offers to meet those needs within local communities.
- We are developing early intervention / wellbeing teams to support people to improve their physical and mental health with a particular focus on addressing health inequalities.

#### What is the inequalities focus

- We know that people from certain communities are more at risk of poorer health, exposed to risk factors, and may not access services to improve their health and wellbeing.
- We need to make sure all of our services take into account needs of different communities and target them to ensure good uptake, experiences and outcomes. In particular, we will focus on supporting people living in areas of deprivation and marginalised groups.

#### How will we measure progress?



(É)

- Reduce % adults who are current smokers.
- Reduce % adults classified as overweight or obese.
- Reduce the standardised rate of emergency admissions due to COPD.
- We will support people to stay well for longer through provision of advice, education, guidance on falls prevention, staying active and healthy, as well as living with and management long-term conditions.
- Through the Mental Health and Learning Disability Collaborative, and the Mental Health Prevention Action Plan, we are working together across the system to promote emotional wellbeing and mental health.
- We will ensure that we focus on tobacco control, promoting healthy weight and physical activity to address the risk factors for poor health and we wil we embed making every contact count at all opportunities.

### Ambition 4 - Employment that keeps them and their families out of poverty

#### Introduction

The causes and consequences of poverty are often complex. There is no single cause, but a range of factors contribute to people's risk of experiencing poverty. Over half of those living in poverty live in working households, where work does not provide enough income to meet basic needs or people fall into poverty due to circumstances beyond their control. Low pay and low wage growth is a key cause of poverty, and we have seen a significant rise in part-time contracts. There is still a strong association between unemployment and poverty. It is clear that our young people are particularly impacted

#### Where we are now

- We have relatively high rates of employment across the area as a whole but there are significant disparities at a more local level.
- There are large gaps in employment for vulnerable communities such as those with serious and enduring mental illness and those with learning disabilities.
- Cost of living crisis and resulting poverty having particular impact on health and wellbeing of residents. There are particular concerns regarding fuel and food costs.
- Many people and families are not claiming financial support they are eligible for.

Joint Local Health and Wellbeing Strategy 2023-2028

#### What you have told us

- The community would like local outreach employment support services including skills training, financial and benefits advice, support for business start-ups and social enterprises.
- Increase the number of apprenticeships for residents of all ages.
- Improved rural transport is needed to support local working people to access jobs.

#### What we want to achieve

.....

- More adults are employed and receive a 'living wage'.
- Adults and families take up benefits they are entitled to.



Ŷĥ

### What is the inequalities focus

We need to address gaps in employment for vulnerable communities such as those with serious and enduring mental illness and learning disabilities, care leavers and those living in areas of deprivation.

### How will we measure progress?

ŶĬŶ

Reduce the gap between overall employment rate and the employment rate for those in touch with secondary mental health services.

#### How we will achieve our ambition

- We will continue to deliver the Anti-poverty Strategy and work on the sustainability of cost-of-living support.
- We will support the West Northants Sustainable Food Network to address food poverty.
- We will develop our financial information and advice offer, especially in considering the needs of under-served communities.
- We will work with education settings, employers and recruiters to ensure there are meaningful and sustainable employment opportunities with targeted hyper-local support for vulnerable groups and those in groups who are under-employed to access jobs and remain in employment.
- The Northamptonshire Anchor Institutions Network will support provision of inclusive employment opportunities, particularly with under-served groups such as care leavers.

### DRAFT Ambition 5 - Good housing in places which are clean and green

#### Introduction

A stable and secure home is one of the foundations of a good life. The condition and nature of homes, including factors such as stability, space, tenure and cost, can have a big impact on people's lives, influencing their wellbeing and health. A secure, comfortable home enriches our lives and supports our mental and physical health. But high costs and a shortage of affordable homes means many people have to live in poor, overcrowded conditions, fall into debt because costs are too high, move frequently, or may face repossessions or evictions. This all creates further instability and stress, with a significant impact on people's health and wellbeing.

As well as housing, the places we live can also impact physical and mental health. Having access to clean and green spaces is important for wellbeing and promoting a healthy life, as well as can enable people to build social connections.

#### Where we are now

- The population of West Northamptonshire has grown by over 13.5% in the last decade which represents among the highest growth in the country.
- 1,972 households were threatened with homelessness within 56 days over 2021/22.
- While the area is largely green and rural, with much of land usage agricultural, access to green spaces for people who live in our urban centres requires improvement.
- Air quality in some areas of Northampton requires improvement.

#### What you have told us

- More affordable rental accommodation is needed that is well maintained by landlords.
- It's very important that the environment around housing is clean, green safe and well maintained.
- We need to tackle shortage of housing and enable all people to access good housing, and considering the need for car parking spaces, open spaces and recreational land.

#### What we want to achieve



- Good access to affordable, safe, quality, accommodation and security of tenure.
- The local environment is clean and green with lower carbon emissions.

#### What is the inequalities focus

- We need secure and safe access to accommodation for vulnerable groups including care leavers and migrants.
- We need to prevent of homeless.
- People living in areas of deprivation are particularly affected by a lack of access to quality green spaces and air pollution.

### How will we measure progress?



Reduce the number of households that owed a Prevention Duty under the Homelessness Reduction Act (Public authorities must take reasonable steps to prevent homelessness for any eligible applicant who is at risk of homelessness within 56 days, regardless of priority of need).

#### How we will achieve our ambition

- We will support the priorities of the Housing Partnership Board and contribute to the action plans of the board's subgroups.
- Through our Parks Strategy, we will ensure our green spaces are equally accessible for all and provide the opportunity to participate in activities. Local Area Partnerships will enable us to develop community led approaches to improving our local environment.
- We will support the work detailed in the air quality action plan through a collaborative working group.

# Ambition 6 - People feeling safe in their own homes and when out and about

#### Introduction

Feeling safe, whether at home, in the street or at work has an effect on quality of life and enabling people to pursue and obtain the fullest benefits from domestic, social and economic lives without fear or hindrance from crime and disorder. The factors that affect community safety include higher levels of deprivation, estate design which favours criminality and youth involvement in anti-social behaviour, drug criminality and violence. Involvement in drug criminality has been linked to missing persons, and children are often exploited, increasing the risk of serious or sexual violence against vulnerable persons. Women and girls do not feel safe on our streets as a result of sexual harassment, and misogyny has become more prevalent online, with websites and chatrooms encouraging sexual violence against women.

#### Where we are now

- The age of youths engaging in drug related violence/weapons and violence against women and girls (VAWG) criminality is decreasing and commonly commences from pre/ early teenager years.
- Those dependent on drugs are often closely associated to neighbourhood crime to fund their addictions. The Home Office estimates 50% of all neighbourhood crime is committed by drug users, mainly heroin and crack users.
- Drug criminality analysis indicated that around 30% of Northamptonshire acquisitive crime was committed by individuals associated with drugs.

Joint Local Health and Wellbeing Strategy 2023-2028

#### What you have told us

The majority of worries and concerns are about; youth violence and drug dealing, anti-social behaviour and knife crime, road safety, home safety, burglary and theft, which means we are scared to go out at night or use certain areas.

#### What we want to achieve

- People are safe in their homes, on public transport and in public places.
- Children and young people are safe and protected from harm.

#### How we will achieve our ambition

- Increased partnership outreach, promoting wellbeing and safety in our communities focused on contextual safeguarding, working with schools and those who are most vulnerable.
- Development of collaborative programmes and pathways for support, training and education.
- Working through the Local Area Partnerships to develop place-based community approaches to priority neighbourhoods and vulnerable locations to ensure people are safe.
- Development of environmental improvements at neighbourhood level that design out crime will be delivered through the safer streets programme.
- Promotion of Fire and Rescue service home safety checks, and use of online home hazard checklist to help prevent falls and other accidents.
- Increased early intervention and youth provision offer to ensure young people are safe and protected from harm – establishing and working with the youth collaborative.

#### What is the inequalities focus

- There is a clear link between deprivation and crime, with focus needed on high need areas.
- Particular groups disproportionally affected by crime, including women and girls and sex workers.
- We particularly want to focus on supporting young people who are more vulnerable to exploitation.

### How will we measure progress?

Reduce the number of referrals to Multi Agency Risk Assessment Conference for children experiencing domestic violence.





ري (ک



### Ambition 7 - Connected to their families and friends

#### Introduction

The assets within communities, such as the skills and knowledge, social networks and community organisations, are building blocks for good health. Community life, social connections and having a voice in local decisions all underpin good health, however too many people experience the effects of exclusion or lack social support.

The internet and digital technology is at the heart now of how public, economic and social life functions. It has transformed how we work, communicate, consume, learn, entertain and access information and public services. However, the spread of access and use is uneven, and many people remain digitally excluded. Those who are excluded can be limited or unable to participate fully in society.

#### Where we are now

- Many of our neighbourhoods score poorly compared with the national average in measures of connectivity to key services, digital infrastructure and isolation.
- While lots of learning and positive action has been taken from the COVID-19 pandemic, social isolation remains an issue including for younger people in deprived urban centres.

#### What you have told us

- You would like to see better communication, so you stay informed and up to date on what is going on.
- Bring people together by offering local activities and events to support healthier lifestyles and to connect with others.
- People in rural communities can feel isolated and lack of community transport affects our ability to get out and about.

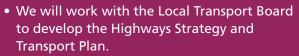
#### What we want to achieve



- People feel well connected to family, friends and their community.
- Connections are helped by public transport and technology.
- Improving outcomes for those who are socially excluded.

#### How we will achieve our ambition

- We will work through our place approach to ensure the right services are in the right place and joined up to enable people to feel well connected to their communities.
- We will communicate in a variety of ways to ensure communities are aware of what is happening in their local communities and how to access support.
- We will build on our Welcoming Spaces Scheme and development of One Stop Shops in communities.



 The Integrated Care Northamptonshire Digital Transformation Strategy will enable us to join up health and social care services and provide more digital access, through the creation of the Northants Care Record and single digital front door. Alongside this we will develop projects to improve access to digital technology and the skills to use it.



#### What is the inequalities focus

- Some groups experience social exclusion, such as those mental health conditions, Gypsy Roma Traveller community, people who are homeless, migrants, sex workers.
- Older people and people with disabilities.
- There is huge variation in digital exclusion across the county with high rates of exclusion both in our most deprived communities as well as less deprived rural communities.

### How will we measure progress?



<u>kg</u>j

Increase % adult social care users who have as much social contact as they would like.

### Ambition 8 - The chance for a fresh start when things go wrong

#### Introduction

As well as ensuring that, as far as is possible, we prevent "deep social exclusion" which includes combinations of homelessness, substance misuse, history of offending and 'street culture' activities (such as begging and street drinking). We also want to ensure that people who have these experiences have a "fresh start in life".

Our West Northamptonshire housing strategy commits to tackling homelessness and rough sleeping in a way that delivers positive long-term outcomes for each individual.

In addition to this, our county-wide Combating Drugs Partnership Strategic Plan recognises the strong connections between addressing aspects of social exclusion in order to improve chances of recovery. This means ensuring access to housing and employment opportunities for those trying to make a fresh start.

#### Where we are now

• Too many people in the county have experiences associated with 'deep social exclusion' - namely, homelessness, substance misuse, history of offending and 'street culture' activities (such as begging and street drinking).

• Too many preventable and early deaths happen due to drug and alcohol use or in people experiencing rough sleeping.

#### What you have told us

- Drugs dealers target young people in our area and it is worrying.
- Targeted support should be available for ex-offenders and homeless people to get their lives back on track.
- More investment in support services for those released from prison, for both physical and mental issues.
- Concern re increasing number of rough sleepers who are asylum seekers with no recourse to public funds.

#### What we want to achieve

(<u>`</u>∕

#### What is the inequalities focus

- People who experience deep social exclusion are an inequalities group in and of themselves.
- Inequity of access to current services still requires further exploration but we believe affects those in rural communities, BAME communities and vulnerable women.



#### How will we measure progress?



Reduce the number of emergency hospital admissions for those of no fixed abode.

- Homeless people and ex-offenders are helped back into society.
- People have good access to support for addictive behaviour and take it up.

#### How we will achieve our ambition

- We will deliver a new homelessness and rough sleeping strategy by April 2024.
- We will increase numbers of people in drug and alcohol treatment services by improving service promotion, address gaps in geographical access, as well as access for under-served groups.
- We will Improve successful completion of treatment by improving treatment for coexisting mental ill health and substance use.
- Increasing the capacity and capability to respond to increasing complexity and Improving quality of care, including particularly for young adults, and transition to adult services, and older people.
- We will Reduce harm due to drug and alcohol use by Strengthening the harm reduction offer and further improve harm reduction and quality of treatment by reviewing and learning from deaths.

**Joint Local Health and Wellbeing Strategy** 2023-2028

### DRAFT Ambition 9 - Access to health and social care

#### Introduction

In West Northamptonshire we want to ensure our residents are able to access the most appropriate health and social care services to meet their needs. We know we need to work with our partners and communities to provide easy and timely access to all health services including primary, secondary and specialist care. As well as access to social care support in places of residence including care homes, nursing homes, specialist centres, or homes. We want our services to be of be good quality, to ensure all people have positive experiences and get the same outcomes, regardless of who they are.

#### Where we are now

- There is delay in access to health services for medical, surgical or mental health interventions.
- Demand of service provision is exceeding current capacity including primary care, accident and emergency, acute services and social care and people are not accessing the right services at the right time.
- Delays in access to health screening and vaccinations is creating delays in early detection and diagnosis of diseases and protecting less people from vaccine preventable illnesses.
- Access to primary care services such as GP, dentists, opticians, podiatry and pharmacy is a challenge, especially for those with learning disabilities due to changing consultation methods.
- There is an inadequate social care bed capacity for patients with changing mental health status.
- There is a delay in timely processing of discharge plans due to medically unfit people not being able to return to a suitable place of residence.

#### What you have told us

- Health care hubs needed in our local communities with walk-in access for a range of services all on one site.
- People with language or communication difficulties find accessing primary care services a challenge.
- Migrants with no access to public funds find it hard to register with a GP, so have to present in crisis to A&E
- More investment is needed in social care services
- The transition from Children and Adolescent Mental Health Services to adult mental health services is not good enough and causes delay in treatment and stress to the family.

#### What we want to achieve

- Timely access to all health and social care services when they need across life course from conception to end of life.
- People are supported to live at places of their residence and only spend time in hospital to meet medical needs.
- Services to prevent illness (all health screening and vaccinations) easy to access with a quality service provision.
- People are treated with dignity and respect in all care provisions including end of life.

#### How we will achieve our ambition

- We will use health equity assessments to understand inequality and inequities in access, experience and outcomes and develop targeted programmes to address the gaps.
- We will take a collaborative approach to develop consistent outreach provision of health services.
- We will redesign existing care pathways by including additional provisions with the help of alternate providers to help deliver the services

#### What is the inequalities focus



- Reaching out to residents not accessing health and social care services through community outreach services.
- Improving accessibility to health and wider services for the vulnerable groups i.e., homeless and rough sleeper, people with substance misuse, unregistered migrant workers, people with learning disabilities or mental health, carers and asylum seekers/ refugees, vulnerable women.

#### How will we measure progress?

ŕĥ



- Increase % cancer diagnosed at stage 1 and 2
- Increase % people discharged from hospital to usual place of residence
- Reduce rate of Emergency Department attendances for falls in those aged 65+
- Increase % eligible adults with Learning disabilities/ severe mental illness who receive annual health check

for people who need it closer to home with appropriate use of the better care fund plan.

- We will work collaboratively to support people to have timely access to services and triage people through appropriate pathways to overcome delays in health and social care support.
- Work to be carried out for a collective system approach to resolve bed capacity issues for people with changing mental health status.

### Ambition 10 - To be accepted and valued simply for who they are

#### Introduction

It is well known that people get a sense of belonging if they are part of a vibrant, welcoming community which can also provide support during difficult times. In West Northamptonshire we want to promote this sense of wellbeing in both rural and urban areas and across all ages and communities. We want everybody who lives in West Northamptonshire to feel valued, to celebrate diversity and the good things this brings to life in our area.

We will continue to work together and with our local communities to ensure living here is a great experience regardless of who you are and how you choose to live, what you believe or how you appear.

Promotion of understanding, tolerance and celebrating what we share, and our differences will support a happy, healthier Northamptonshire which in turn can set a great example to other parts of the country.

#### Where we are now

- The 2021 census showed an increase in the population in West Northamptonshire by 13.5% to 425,700 people across all ages with growth greater than the England average 30.3% (20.1% in England).
- We are an increasingly diverse population with 24.9% identifying as non-White British an increase from 8.8% in 2001.

### Joint Local Health and Wellbeing Strategy 2023-2028

#### What you have told us

- We want more cultural events to support community cohesion.
- Welcome packs and newsletters at a community level would support community unity.
- We need more intergenerational activities locally to promote inclusivity.
- African migrants and some other BAME communities feel marginalised from representation in civil and public life.
- LGBTQ accessibility schemes should be promoted and LGBTQ community involved in shaping services.
- Ensure investment and resources are available in rural communities.
- Involve local communities in decision-making and service design.

#### What we want to achieve

• Diversity is respected and celebrated.

.....

- People feel they are a valued part of their community and are not isolated or lonely.
- People are treated with dignity and respect.

#### How we will achieve our ambition

- We will take a community based approach to shape the ambition and actions in partnership with identified groups and communities using the Well Northants model.
- We will implement equality standards and strategies across system organisations.
- We will ensure our extensive community engagement framework established is built on and maintained, and that it is reflective of our communities.
- We will increase access to activities and community events to develop inclusion and participation and celebrate diversity.



#### What is the inequalities



- Seldom heard and ethnically diverse communities.
- Marginalised communities e.g. sex workers, Gypsy, Roma Travellers, homeless.
- People living in the most deprived areas.



this ambition.

develop appropriate measures for

### ŶĬŰ

### DRAFT Our governance - making things happen

#### Leadership

Our Health and Wellbeing Board plays a key statutory role in facilitating joint working across the system and setting the strategic direction to improve local health and wellbeing in West Northamptonshire.

It provides a forum where political, clinical, professional and community leaders from across the system come together to improve the health and wellbeing of their local population and reduce health inequalities.

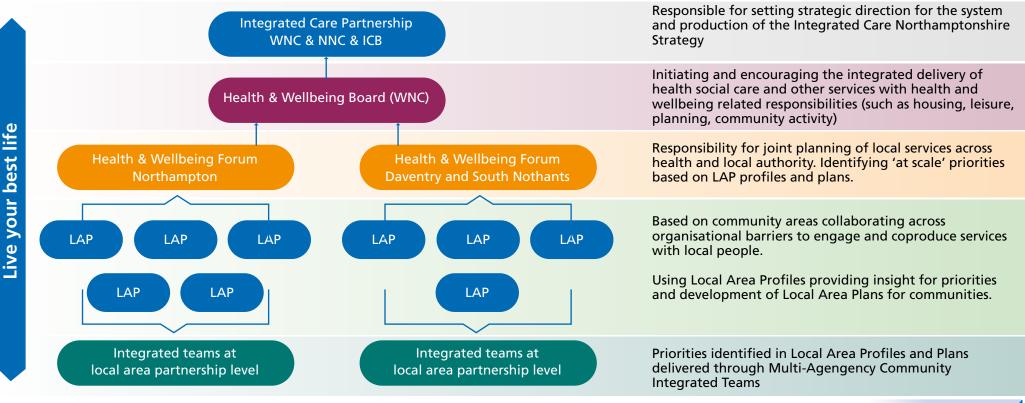
The strategy is strongly linked with many wider strategies and strategic delivery boards for example the Community Safety Partnership, Combatting Drugs Partnership and Housing Delivery Board to name a few.

#### Governance

A strong model of accountability is in place to ensure this strategy is driven forward and that performance against key outcomes is measured, monitored, and reported.

#### **Reporting progress**

It is the intention of the Health and Wellbeing Board to regularly review progress against the key outcomes in this strategy aligned to our 10 Live Your Best Life ambitions. We intend to share this progress with our communities in West Northamptonshire on a regular basis and if necessary, adjust our trajectory and resourcing.



### Joint Local Health and Wellbeing Strategy 2023-2028

### Our performance framework

Ambition	Available system priority metrics	
Best start in life	% achieving good level of development at age 2-3	
Access to best education and learning	<ul> <li>Average attainment 8 score of all pupils</li> <li>% of SEND children electively home educated</li> <li>Rate of permanent exclusions (per 100 pupils)</li> </ul>	
Opportunities to be fit, well and independent	<ul> <li>% of adults currently smoke (APS)</li> <li>% Adults classified as overweight or obese</li> <li>Adolescent self-reported wellbeing (SHEU)</li> <li>Standardised rate of emergency admissions due to COPD</li> </ul>	
Employment that keeps them and their families out of poverty	Gap in employment for those in touch with secondary mental health services	
Good housing in places which are clean and green	Number of households owed a prevention duty under Homelessness Reduction Act	
People feeling safe in their own homes and when out and about	Number of re-referrals to MARAC for children experiencing domestic abuse	
Connected to their families and friends	% adult social care users with as much social contact as they like	
The chance for a fresh start when things go wrong	• Number of emergency hospital admissions for those with no fixed abode	
Access to health and social care	<ul> <li>% Cancer diagnosed at stage1/2</li> <li>% of people discharged from hospital to their usual place of residence</li> <li>Rate of emergency department attendances for falls in those aged 65+</li> <li>% eligible looked after children and adults with Learning disability/Severe mental illness receive annual health check</li> </ul>	
To be accepted and valued simply for who they are	Metrics to be developed	

Having a set of metrics which we can use to monitor our progress is really important in ensuring that we are moving forward and delivering the ten 'Live Your Best Life' ambitions.

The metrics outlined in this performance framework have been agreed by the Integrated Care Northamptonshire Partnership as metrics we as a county will be working together to improve.

There will be many other detailed performance metrics that we will be monitoring as part of the delivery of this strategy but the performance frameworks outlines those metrics that are key priorities for us as a partnership and these will be reported to the HWB.

### DRAFT Members of the West Northamptonshire Health and Wellbeing Board

