

v6 4/12/2018 for HWB

Hampshire's Joint Health and Wellbeing Strategy 2019–2024

Draft for Consultation

DRAFT

[Note: design work will be undertaken once the text of this Word document has been approved]

Hampshire's Joint Health and Wellbeing Strategy 2019–2024

Introduction

Hampshire's Health and Wellbeing Board brings together partners from local government, the NHS, other public services, and the voluntary and community sector. The Board aims to ensure that organisations plan and work together to improve the health and wellbeing of Hampshire residents. It is only by working together that we can make a big difference to outcomes for all our residents.

This draft Strategy document sets out the Board's vision and key priorities for the next five years. It looks at both short and longer-term goals, and how we will measure success.

Our Vision

Our vision is to help people in Hampshire to live long, healthy and happy lives, with the greatest possible independence. We want to narrow the gap in life expectancy and improve healthy life expectancy. In simple terms, we want to ensure that those living longer are also healthier for longer. Making best use of the limited resources we have, we want to improve outcomes and resilience for people of all ages. We want children to have the best possible start in life. We also want people to have choice, control and dignity at all stages of life, including at the end of life.

We will do this by:

- Promoting wellbeing and taking a preventative approach
- Supporting people to take responsibility for their own health and wellbeing
- Improving services so they deliver good, accessible and joined-up care
- Focusing on reducing the significant difference between those with the best and worst health in Hampshire
- Using local networks, knowledge and partnerships to ensure services and activities are more joined up and respond to what communities need
- Putting together a plan each year to communicate what areas the Health and Wellbeing Board will focus on to help deliver this Strategy

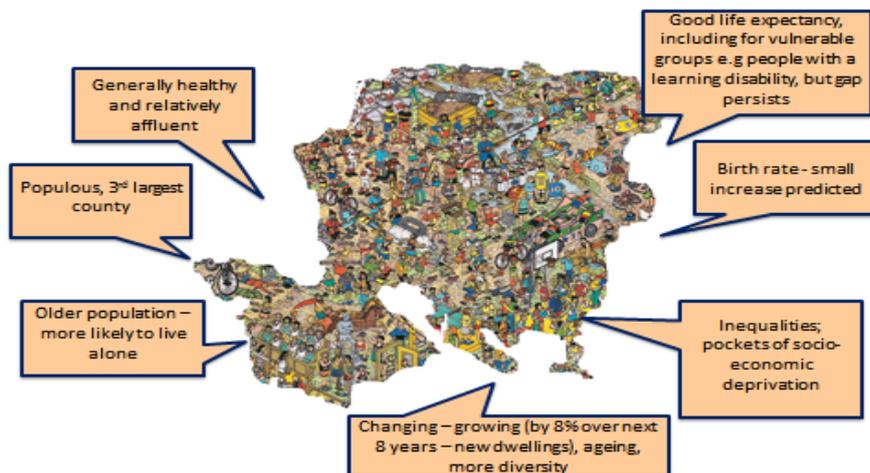
What do we already know?

The Joint Strategic Needs Assessment (JSNA) is a key source of information, as it looks at the current and future health and wellbeing needs within our Hampshire population. The priorities and challenges covered in this draft Strategy link back to the JSNA.

As outlined in the JSNA, overall Hampshire is a prosperous county. However, there are inequalities between areas. Parts of Eastleigh, New Forest, Test Valley, Havant, Rushmoor and Gosport rank among the most deprived 20% of areas in England.

The population is changing, getting older and becoming more diverse. The proportion of the population who are 85 years and over is expected to increase by almost 30% by 2023.

In Hampshire, life expectancy at birth for both men and women is better than the England average and is increasing. However, there is a gap between life expectancy and healthy life expectancy. Men spend 14 years and women spend 16 years of their life in poor health.



A second source of information that underpins the priorities and activities described in the Strategy is feedback from residents and users of services. Organisations involved in the Health and Wellbeing Board regularly carry out consultation, engagement and coproduction to develop and improve services. This feedback has been incorporated into the priorities and suggested areas of activity.

Thirdly, Board members and individuals in partner organisations have also helped to shape the Strategy through workshops and discussions and contributing towards the drafting process.

This is the Health and Wellbeing Board's second Strategy. We aim to build on the good work that has already taken place. We are looking at new ways of implementing and monitoring this new Strategy. We want to make sure it stays fit for purpose over its five year duration.

In this draft Strategy, we have identified four key priority areas, and two 'enabling' priority areas as follows:



Starting Well

How are we doing in Hampshire?

There are just over 322,000 children and young people in Hampshire aged 0–19. This represents 21% of the county’s population. The number of 0–19s is projected to increase by 4.8% in the next 5 years.

Generally Hampshire’s children have good health and good life chances. They are less likely than the national average to:

- live in poverty;
- be homeless;
- be born with low or very low birth weight; or
- be born to teenage mothers.

They are more likely to attend school regularly and be immunised against infectious diseases. Educational attainment is good, but with some variations in performance in disadvantaged groups.

The main causes of concern in Hampshire are:

- increasing obesity;
- emotional wellbeing and mental health;
- educational attainment in disadvantaged groups, including those children with Special Educational Needs and Disabilities (SEND); and
- insufficient levels of physical activity.

Hampshire has higher rates of hospital admissions for self harm in 10–24 year olds than nationally. In 2015–17 there was an increase in Hampshire’s infant mortality rate.



Where do we want to be in five years' time?

Our aim is to improve health, happiness and achievement of children and young people. We will transform health and care services by:

- Bringing services together where this will lead to improved outcomes for children and young people
- Developing the service model with service users, children and young people and their families
- Providing the right support at the earliest opportunity
- Intervening earlier and placing more emphasis on preventing children and young people from needing Child and Adolescent Mental Health Services (CAMHS)
- Helping people access their own advice and guidance
- Planning successful transition to adulthood
- Using technology and encouraging self care
- Ensuring equitable access to services

We will achieve our aim by:

- Implementing family centred and strengths based approaches
- Hampshire Clinical Commissioning Groups (CCGs), NHS England, Hampshire County Council Public Health and Children's Services working together to deliver an integrated service delivery model where this improves outcomes
- Developing an integrated wider mental health service with a focus on prevention and earlier intervention to improve mental health and reduce pressure on CAMHS

Key priorities for improvement

- Improve mental health and emotional resilience for children and young people. This will prioritise mental health in vulnerable groups, including

Adverse Childhood Events, the mental health of parents including perinatal mental health, and emotional resilience in educational settings.

- Improve physical health in children and young people through prevention and early intervention. This will prioritise healthy weights, physical activity and reducing smoking in pregnancy.
- Service and system transformation, including integration of NHS and Public Health services, where this will improve outcomes and reduce inequalities for children and young people.

Where will we start in 2019/2020?

The Year 1 implementation plan will deliver progress on all three priorities:

- **Mental health and emotional resilience**
 - The publication and start of implementation of an Emotional Wellbeing and Mental Health Strategy for Hampshire
 - Increased investment in mental health through the Local Transformation Plan funding announced in the Budget
 - Starting to co-design a wider mental health service model ahead of procurement in 2021/2022
 - Ensuring perinatal mental health services are providing timely access to women
 - Agreement of system approach to supporting children and young people who have had Adverse Childhood Events under leadership of the Police
- **Improving physical health**
 - Development of prevention and early intervention approaches
 - Continued delivery of Hampshire's childhood obesity action plan
 - Continue to develop a strategic approach to reducing smoking in pregnancy. This includes the work of the High Impact Area Board, which aims to improve pathways between maternity and health visiting, a procurement of smoking cessation services in Hampshire and work being done through the Local Maternity System led by maternity
- **Transforming services**
 - The re-procurement of Public Health nursing services with an increased focus on vulnerable families, digital transformation of the service and increased co-design with service users and frontline staff
 - The development of an integrated community service for children with complex needs through a CCG-led procurement which aligns with Public Health nursing
 - Continued implementation of Transforming Social Care with support from system partners

How will we measure our progress?

We will put together a small number of performance measures that we can monitor over the five years of the Strategy. These will be underpinned by a Children and

Young People's integration outcomes framework and a shift towards outcomes based commissioning and a move away from process based commissioning. The outcomes framework needs further work and will develop iteratively over time. The Starting Well theme will be supported by an implementation plan related to the individual priorities, which in turn will have more detailed progress measures. Measuring the impact of system level transformation is difficult and so will require academic expertise to determine whether it is leading to improvements in outcomes for children, young people and their families.

Some potential examples of performance measures for 'Starting Well':

Improved mental health and emotional resilience:

- Improved school readiness measured through attainment of a good level of developmental readiness
- A reduction in hospital admissions for self harm in 15-24 year olds
- Reduced waiting list and times for CAMHS during lifetime of this strategy
- Improvement in self reported emotional resilience in school surveys during the lifetime of this strategy

Improved physical health:

- Reduction in prevalence of smoking in pregnancy
- Stabilisation of rates of overweight and obesity in Years 1 and 6 during the lifetime of this strategy
- Improvement in self-reported physical activity in school surveys

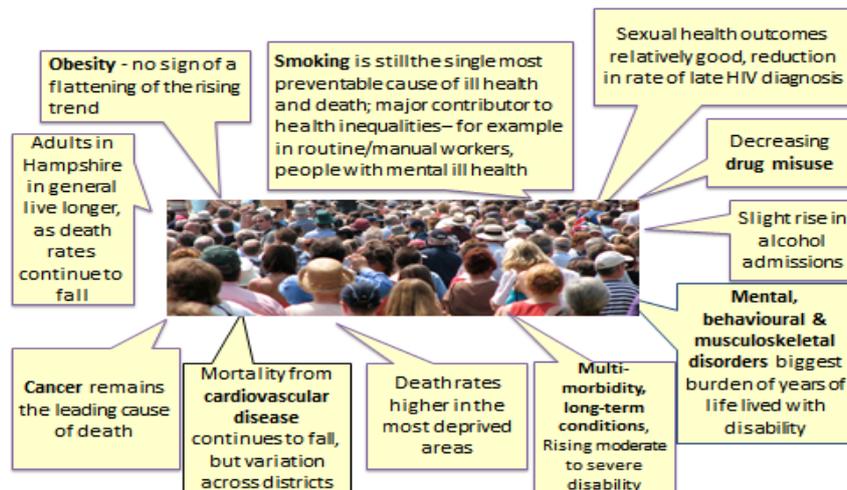
Service and system transformation:

- Agreement on system level outcomes to be included in all service specifications in aligned procurements
- Public Health nursing (start date of new service 1/8/2020); CCG community services procurements (start date of new service 1/4/2021); and CAMHS procurement (start date of new service 1/4/2022) being delivered in time.
- A reduction in the number of Children in Care and Looked After Children
- Evaluation of system integration by a local university to determine whether efforts have led to improved outcomes or not.

Living Well

How are we doing in Hampshire?

There are just over 1.07 million adults aged 18 and over in Hampshire. This represents 79% of the total population. Hampshire has an older population compared to England with a higher proportion of the population aged 45 years and fewer young working aged people (aged 20–39). The proportion of residents with a limiting long-term illness or disability is comparable to England. However, the size of the Hampshire population means that the absolute numbers of people experiencing ill health or disability are large.



Where do we want to be in five years' time?

We want to reduce preventable ill-health. We will do this through concerted action on the risk factors we know contribute most to disease. We want to accelerate the reductions in people smoking, especially in our more deprived communities. We want to have a clear understanding of mental wellbeing in our communities and how we can influence it. We want to maximise the life opportunities of people living with health conditions and disabilities. We will use a strengths based approach to care and support.

Key priorities for improvement

- Work together to enable people to live healthier lives focusing on the main lifestyle risk factors. We will start with smoking, obesity and physical inactivity.
- Improve population level mental wellbeing and reduce mental ill-health.
- Enable people with long-term conditions to live healthier lives for longer and reduce variation in outcomes.

Where will we start in 2019/2020?

The Year 1 implementation plan will deliver progress on all three priorities:

Enable people to live healthier lives

- Scale up our approaches to addressing lifestyle risk factors, using evidence based behaviour change approaches
- System wide action to stop people starting to smoke and to help smokers to quit
- Align with community enablers to tackle the wider causes of obesity, and ensure we make every contact count
- Implement the Hampshire Physical Activity Strategy across our organisations

Improve population level mental wellbeing and reduce mental ill-health

- Take a community approach to resilience, supporting the 'Five Ways to Wellbeing' initiative
- Support a Zero approach to suicides within organisations and the whole population
- Take a system wide approach to self harm prevention
- Increase focus on improving the physical health of people with serious mental illness across our organisations and helping people into work

Enable people with long-term conditions to live healthier lives for longer and reduce variation in outcomes

- Develop clear plans with the STP to address variation in outcomes for people with long-term conditions
- Use the emerging population health management approach to work with primary care groups serving neighbourhoods to identify local actions
- Commission and learn from initiatives to enable people to improve their self management and provide peer support for long-term conditions
- Mental Health Resilience programmes are being developed and enhanced in Wellbeing Centres across Hampshire
- Take action to address the gap in acute hospital investment in addressing the mental health needs of inpatients to support physical health recovery

How will we measure our progress?

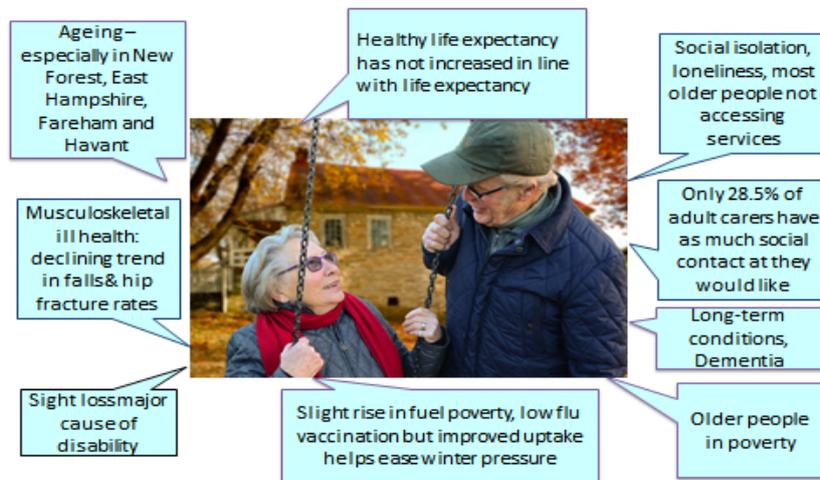
We will put together a small number of performance measures that we can monitor over the five years of the Strategy. Some examples for 'Living Well':

- Proportion of the adult population who are current smokers, including those in lower socio-economic groups
- Proportion of the adult population with excess weight
- Proportion of the adult population who are physically inactive
- Proportion of the adult population who have a current diagnosis of anxiety / depression
- Suicide rate, with the aim of reducing suicides by 10% in 5 years
- Long-term condition management: Improvement in answer from the GP Patient Survey on support and confidence managing your own condition
- Improvement in clinical outcomes for selected long-term conditions

Ageing Well

How are we doing in Hampshire?

Across Hampshire, just over 1 in 5 people are 65 years and over compared to nearly 1 in 6 nationally. The population of people over 65 in Hampshire is projected to increase to over 333,000 people by 2023. People in Hampshire are enjoying longer lives than ever before, but not all of these extra years are lived in good health. Long-term conditions, dementia, musculoskeletal problems and social isolation are more common in older age and can significantly affect the wellbeing of our older population.



Where do we want to be in five years' time?

We want residents to be able to live their later years in a way that helps them to feel healthy, connected and purposeful. This means living in places that enable social connections, offering opportunities to take part in meaningful activity and being surrounded by people who offer support and value the contribution of older people.

Key priorities for improvement

- Continue to develop connected communities which can support people to live happy, healthy lives in the place of their choosing
- Enable people to plan for a fulfilling, purposeful older age
- Create healthy home environments which allow people to stay well and independent into older age
- Enable older people to lead healthy, active lives

Where will we start in 2019/2020?

The Year 1 implementation plan will deliver progress on the four priorities:

- Conduct a healthy homes needs assessment to understand what more we can do to help people stay well and independent at home for longer
- Use the principles of the Social Value Act to enhance wider social, economic and environmental benefits through commissioned services
- Develop joined up social prescribing and connector models across health and social care to provide support for people who need help outside formal services
- Encourage volunteering opportunities for people who feel lonely
- Upscale opportunities for strength and balance exercise for people over 50

How will we measure our progress?

We will put together a small number of performance measures that we can monitor over the five years of the Strategy. Some examples for 'Ageing Well':

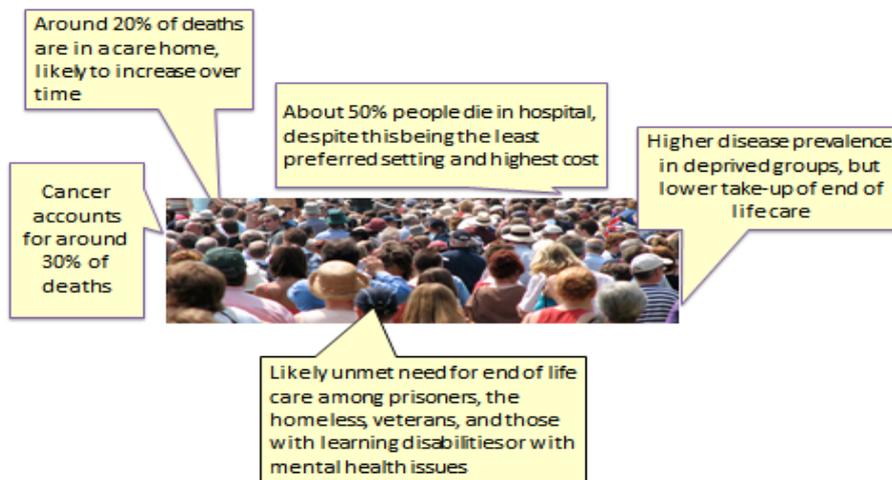
- Healthy life expectancy at age 65 years
- Gap in life expectancy between people living in the most and least deprived areas
- Emergency admissions due to falls in people aged 65 and over
- Hip fractures in people aged 65 and over
- Social isolation: percentage of adult social care service users who have as much social contact as they would like
- Social isolation: percentage of adult carers who have as much social contact as they would like
- Reduction in delayed transfers of care (ie when a patient is ready for discharge but is still occupying a hospital bed)

Dying Well

How are we doing in Hampshire?

During 2016, 12,480 residents of Hampshire died. Almost one third of deaths were due to cancer. Almost 27% of all deaths were premature: almost half of these were due to cancer and over one fifth were circulatory diseases. Around 10% of deaths had mental and behavioural disorders as the underlying cause of death, the huge majority of which were from dementia. Amongst other long-term conditions, dementia is an important chronic condition for which palliative care is needed because unlike other long-term conditions there is a shorter window of opportunity to have meaningful conversations with people about their wishes for the end of their life.

Whilst child deaths are rare, in Hampshire 92 child deaths were notified to the Child Death Overview Panel in 2017/18. Over two-thirds (67%) of child deaths reviewed in Hampshire were of children under the age of one.



Where do we want to be in five years' time?

We want to move to a situation where people of all ages have an improved experience so that the last phase of their life can be as good as possible. Individuals will have timely, honest and well informed conversations about dying, death and bereavement. Their preferences and wishes will be known and recorded in advance to ensure clear communication with all involved in providing care and support at end of life. Parents, family, friends and other loved ones will be supported with preparing for loss, grief and bereavement. This support will continue after the death of the person. More people will be enabled to die well in a place of their choosing, receiving equitable end of life/palliative care irrespective of their primary diagnosis. Care will be well integrated and coordinated, between the NHS, specialist palliative care, hospice services, social care and the voluntary sector. There will be transparency about the role each organisation plays so that it is clear to everyone, including the person at end of life, their family and support networks.

Key priorities for improvement

- Ensure person-centred care, choice and control is consistently in place across Hampshire.
- Make available carers and nursing staff 24 hours a day, to support people at end of life to return to or remain in their preferred setting in the last days and hours of life.
- Improve skills and capacity across Hampshire to ensure people are encouraged and supported to have early and timely conversations about end of life wishes and choices. This will help individuals and their families to plan and prepare in advance.
- Work together effectively across organisations to provide well integrated care, building on a shared care plan irrespective of organisational or funding boundaries.

- Improve access to bereavement support and services locally, for all age groups, especially for parents, families and educational communities following the death of a child, and for children experiencing the loss of a parent.

Where will we start in 2019/2020?

The Year 1 implementation plan will deliver progress on the four priorities:

- Establish a steering/reference group at Health and Wellbeing Board level to:
 - lead a review of priorities and measures
 - define and drive activity to implement the revised priorities; and
 - ensure all activity locally/nationally is shared consistently across the system
- Ensure that a systematic approach is taken to identification and consistent implementation of relevant tools and pathways across Hampshire, such as the Gold Standards Framework, Six Steps Programme and the ReSPECT tool
- Work together to ensure a systematic identification of people who are on an end of life pathway
- Work together on a systematic instigation of key conversations and recording of wishes, enabling open two-way conversation between the individual, family and all the relevant health and care professionals and providers of end of life support

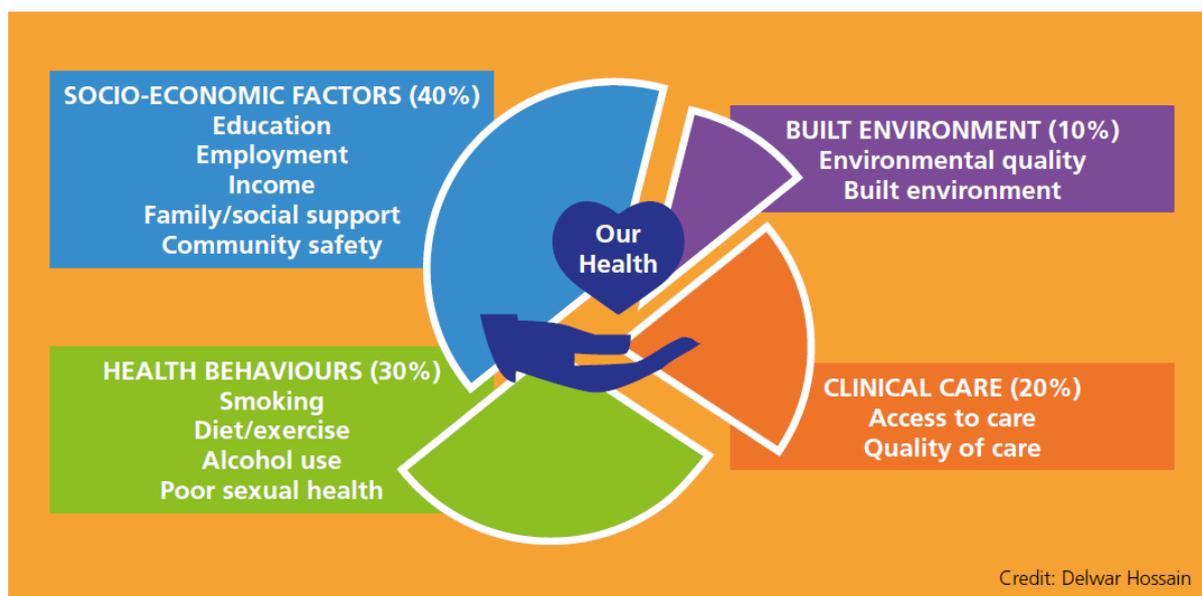
How will we measure our progress?

We will put together a small number of performance measures that we can monitor over the five years of the Strategy. Some examples for 'Dying Well':

- Proportion of people dying in the place of their choosing
- Bereaved carers' views on the quality of care in the last three months of life
- The proportion of carers who report that they have been included or consulted in discussion about the person they care for
- Access to NHS Continuing Health Care fast track

Healthier communities

Many factors contribute to our health and wellbeing and only about half of these factors are 'health related'. The type of housing and neighbourhood we live in, how connected we are with family, friends and our local community, how much money we have, whether we have a job, the lifestyle we follow, and whether we can access transport, leisure and other facilities all play a part.



To achieve the ambitions in this Strategy, and particularly to address health inequalities, we recognise that all partners will need to work together on some key enablers (often called the ‘wider determinants of health’):

- Making sure that health and wellbeing priorities are reflected in all local policies
- Supporting communities to be strong and connected to reduce loneliness and isolation
- Ensuring neighbourhoods are well designed to help people make healthy choices
- Advocating for more affordable housing; promoting accessible design in housing; tackling homelessness
- Education and skill development from early years through schools and into adulthood
- Tackling poverty where possible, and helping people to access jobs
- Promoting sustainable, accessible transport and active travel
- Improving access to green and blue spaces and leisure facilities
- Reducing impact on the environment
- Improving air quality

The County Council, district and borough councils and the community and voluntary sector are well placed to influence the above factors but NHS partners also have a central role to play.

Local level organisations are particularly well placed to identify trigger points for crisis and to implement interventions that divert or prevent people’s needs from escalating. They also have invaluable knowledge that can be better utilised to inform commissioning. There is a recognition however that resources are diminishing, so we need to join up support and target resources better, seeking to reduce duplication of effort and spend.

Early engagement with district and borough councils has suggested the following three potential priority areas for enhanced joint working:

- Family, friends and community – eg supporting communities to be more resilient, building social networks and reducing loneliness and isolation; linking in with the County Council’s place-based demand management and prevention programme which will be working in each Hampshire district area
- Housing – eg reducing homelessness, helping people access affordable housing, helping vulnerable people to maintain tenancies, lifetime homes
- Built and natural environment – eg ensuring new developments are designed with health and wellbeing in mind; ensuring access to green spaces, facilitating active travel and physical activity, eg through accessible leisure facilities and opportunities

As part of the ongoing Strategy consultation process, the Health and Wellbeing Board will continue its engagement with district and borough councils and the voluntary and community sector to define what support organisations want from the Health and Wellbeing Board, and to develop some shared goals for healthier communities in Hampshire.

Strategic leadership – how we can join up the system better across Hampshire

Hampshire is a large county, with a complex range of services in the public, private voluntary and community sectors. A crucial part of the Health and Wellbeing Board’s role is to join up the system better, adding value to the collective delivery arrangements of all the different organisations involved in health and wellbeing.

We want to see transformational improvement across the whole system, so that wherever you live in Hampshire, you can expect consistent outcomes when you interact with services and organisations that support health and wellbeing.

The Board will use a population health management approach to inform this work, and over the next five years will oversee a number of ‘enabling’ workstreams to help join up and improve the health and wellbeing of the population. Progress on these workstreams will be reported regularly to the Board. These key enablers, with some examples of activity that the Board will oversee, are outlined below:

1. Deliver care closer to home

Outcome:

To support people at the right time, in the right place, and with the right services, so that fewer people are unnecessarily admitted to hospital or delayed there once they are ready to leave, and they can access suitable services after being in hospital to help them recover.

How:

- Delivery of the Patient Flow and Onward Care programme

- Universal adoption of the ‘New Care Models’, which bring together local health, care, council, and voluntary services and communities to focus on the needs, priorities and assets of people in NHS ‘cluster’ localities, including work around prevention and self-care
- Demand Management and Prevention programme, including developing one system of signposters and connectors across the county: and working with the local communities and the voluntary sector in a place-based way to increase resilience
- Integrated intermediate care, to facilitate care in the most suitable setting for people, wherever possible in their own home

2. Harness the potential of digital solutions

Outcome:

To give people the opportunity to take control of their information and to enable organisations to work together better to deliver seamless care

How:

- Make Technology Enabled Care (TEC) a central plank in the delivery of care services and the broader offer to residents, as well as offering TEC to a wider set of authorities and organisations
- Continue to develop the Hampshire-wide IT systems (called CHIE and CHIA) to facilitate greater sharing of records and use of analytical information to better understand the needs of residents
- Link up different organisations’ IT systems so services can work together better across Hampshire

3. Support a sustainable workforce of paid staff, unpaid carers and volunteers

Outcome:

To create the conditions where individuals receive sufficient support from the right people – whether paid or unpaid – who have the knowledge, training and motivation required for their roles

How:

- Develop a system-wide workforce strategy for the Hampshire local care system
- Implement the Hampshire Joint Carers’ Strategy 2018–2023
- Work together to increase volunteer numbers

4. Consistent and accessible information and advice

Outcome:

To enable people to take control and access the information they need

How:

- Make Connect to Support Hampshire the ‘go to’ site for:
 - anyone looking for care and support information and advice in Hampshire

- statutory and voluntary organisations as their primary resource for signposting, linking in with development of more consistent connector/signposting services

5. Improve health and wellbeing for people in HWB organisations

Outcome: people in our organisations feel supported to be healthy and can help others

How:

- Ensure healthy eating options are provided and accessed at HCC and other catered premises and share the learning with public sector and commercial providers
- Improve physical and mental health in schools and colleges (through healthy schools initiatives)
- Build awareness across all of the public sector staff and the voluntary sector to have healthy conversations and to make every contact count

6. Make better shared use of our buildings and community resources

Outcome: we use our reducing resources wisely to provide joined-up services that are easy to access

How:

- Continue to identify better ways to use public sector land and buildings to increase their efficiency, support integration and provide multipurpose community hubs

Your views

We would like to hear your views, in particular:

- Are there any key issues missing from the Strategy that would benefit from a joint pan-Hampshire approach being taken at Health and Wellbeing Board level?
- How could you or your organisation contribute towards delivering on the priorities and proposed areas of activity in this Strategy?
- Are there any other comments you would like to make?

Your feedback will be used to improve the draft Strategy and to inform the implementation planning process for the Strategy. A final version will be presented to the Hampshire Health and Wellbeing Board for approval in March 2019. We will then develop an implementation plan to set out how we will deliver on the strategy in its first year.

Please email any feedback to hampshirehwb@hants.gov.uk or write to us with your views:

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Closing date: 22 February 2019

Your data

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Hampshire County Council is seeking to record your views, comments and other information about you through this consultation. The information you provide will only be used to understand views on the draft Strategy set out in this consultation. All individuals' responses will be kept confidential and will not be shared with third party processors, but responses from organisations may be published in full. All data will remain within the UK. Responses will be anonymised and summarised in a public consultation findings report. Responses will be stored securely and retained for one year following the end of the consultation before being deleted or destroyed.

Where the information provided is personal information, you have certain legal rights. You may ask us for the information we hold about you, to rectify inaccurate information the County Council holds about you, to restrict our use of your personal information, and to erase your personal data. When the County Council uses your personal information on the basis of your consent, you will also have the right to withdraw your consent to our use of your personal information at any time. Please see our website www.hants.gov.uk/privacy for further details.

You can contact the County Council's Data Protection Officer at data.protection@hants.gov.uk. If you have a concern about the way we are collecting or using your personal data, you should raise your concern with us in the first instance or directly to the Information Commissioner's Office at ico.org.uk/concerns.

Alternative formats and queries

To request this information in another format such as large print, audio or Braille, or for any queries about the consultation, please contact Hampshire's Health and Wellbeing Board at:

E-mail: hampshirehwb@hants.gov.uk
Telephone: 01962 845195