

# Cumbria Joint Health and Wellbeing Strategy

**2019 - 2029**

## Introduction

The Cumbria Joint Health and Wellbeing Strategy 2019-2029 sets out the vision and priorities that will shape how the Cumbria Health and Wellbeing Board will work together over the next ten years.

The strategy underpins the Board's ultimate aim to improve the overall health and wellbeing of the people of Cumbria and reduce health inequalities.

It is an important document, all Clinical Commissioning Groups, Local Authority and NHS England plans should take the Joint Health and Wellbeing Strategy into account. The Integrated Care System Plans for North Cumbria and South Cumbria & Lancashire and the Cumbria Joint Public Health Strategy in particular are the delivery mechanisms for the Strategy and therefore will reflect its priorities.

Key to the implementation of this strategy will be the development of mechanisms for working together and for assessing how decisions that are being made influence the aims set out in this strategy. Some of these mechanisms, such as the Health and Well Being Board, Public Health Alliance and the Local Health and Wellbeing Fora, are in place already but some will be refreshed to enable them to develop local action in support of the strategy.

### **The Strategy is in two main sections:**

The first outlines the framework for the Strategy, its vision, key themes, principles and outcomes.

The second expands on the four key themes and most importantly identifies potential priorities for immediate focus.

Feedback from the public and a wide range of partners has been taken into consideration.

The priorities for the strategy are evidenced based, building upon the data and intelligence provided through our Joint Strategic Needs Assessment (JSNA). More information on the JSNA can be accessed here:

[www.cumbriaobservatory.org.uk/jsna](http://www.cumbriaobservatory.org.uk/jsna)

### **How will we measure the overall success of the strategy?**

The overall aim of the Cumbria Joint Health and Wellbeing Strategy is enable Cumbrian communities to be healthy and to tackle health inequalities. High level measures of success will be monitored through changes to life expectancy, healthy life expectancy and the life expectancy / healthy life expectancy gap between the most and least deprived communities.

## Vision - To enable Cumbrian communities to be healthy and to tackle health inequalities

### Key Themes

Protecting the health of the population as a whole

Provide high quality, integrated, person-centred care

Tackling the wider determinants of health and wellbeing

Improving health and wellbeing throughout the life course

### Principles

Proactive wide reaching partnerships especially with our third sector

Independent, activated and resilient individuals and communities

A sustainable health and care workforce

Using technology to support population health management, prevention and self-care

Clear governance supported by evidence based decision making

Prevention and Early Intervention at the Core

Tackling inequalities in health and service provision

Co-production at the heart of planning and delivering improved health and care services

### Outcomes

People in Cumbria are healthy and make positive choices about their wellbeing

People remain independent and healthy for longer

People access the right services in the right place at the right time

Unnecessary service demand reduces, satisfaction increases and clinical and financial sustainability improves

Delivered through North and South Systems' bespoke delivery plans and the Joint Public Health Strategy

Key Theme	Protecting the health of the population as a whole
Why is this important?	<p>Health protection focuses particularly on how the public is protected from infectious diseases, cancer and environmental hazards such as chemicals, radiation and extreme weather.</p> <p>Health protection has a significant multi-agency dimension. Screening and immunisations for children and adults are commissioned by NHS England and delivered by local health services. Communicable disease control involves significant joint efforts by the County Council public health team, District environmental health departments and Public Health England, among many others. Resilience work is coordinated through the multi-agency Local Resilience Forum.</p>
Priorities for immediate focus	<ul style="list-style-type: none"> <li>• Boosting uptake of MMR vaccine, flu vaccine and screening appointments in eligible groups;</li> <li>• Supporting people with Learning Disabilities to access immunisation and screening opportunities;</li> <li>• Tackling Antimicrobial Resistance.</li> </ul>
How are we going to measure progress	<ul style="list-style-type: none"> <li>• Flu/MMR Vaccination Coverage – At risk individuals;</li> <li>• Analysis of screening rates;</li> <li>• Rate of community acquired gram negative bloodstream infections?</li> </ul>

Key Theme	Provide high quality, integrated, person-centred care
Why is this important?	<p>Cumbria's Health and Wellbeing Board agree that a focus on Health and Wellbeing needs to be more holistic than just looking at preventing ill health.</p> <p>Like the rest of the country, there has been an unprecedented increase in the demand for health and social care services. Cumbria shares a common national aspiration to allow people right across the county to live in the best mental and physical health possible for as long as possible, not to primarily achieve sustainability and save money but because it's the right thing to do.</p> <p>It is recognised that to achieve change more services should be available closer to home and in the community. This will help to reduce the number of people entering acute provision and ensure people can access the right service in the right place at the right time. Integrated Care Communities are providing the building blocks for this to happen at a local level.</p>

Key Theme	Provide high quality, integrated, person-centred care
Why is this important?	<p>Providing person-centred care to people and families also requires services and teams to think differently, perhaps working more flexibly or in a joined up way to identify and deal with problems as far ‘downstream’ as possible. Carrying out this change in the context of wider integration work through Integrated Care Communities also provides the opportunity for service redesign to fully embrace community assets. This includes people and patients themselves. People who are empowered and activated, living in thriving communities are more likely to self-care and maintain independence for longer. Delivering successful health and care integration also means looking beyond healthcare to ensure the Cumbrian Pound goes as far as possible. There needs to be a focus on working across the public sector to maximise the impact of the workforce on the people served across the county. Instead of being a group of organisations, health and care needs to be seen as a collective of professionals, volunteers and residents who come together with the health and wellbeing of all Cumbrian People as a common concern and interest. The people who need to be involved aren’t necessarily health and care providers, they may be from the third sector, or other teams, such as the Fire and Rescue Service. They may be friends, family and neighbours.</p> <p>This will support the principle of prevention and early intervention which is integral to delivering successful services right across Cumbria that reduces health inequalities, including rural inequalities.</p>
Priorities for immediate focus	<ul style="list-style-type: none"> <li>• Continued development of Integrated Care Communities (ICCs);</li> <li>• Integration of Reablement and Rehabilitation services;</li> <li>• Redesign of services aimed at families including the 0-19 Healthy Child Programme, Early Help and Family Hubs;</li> <li>• Ensuring mental health and learning disability services are fit for purpose.</li> </ul>
How are we going to measure progress	<ul style="list-style-type: none"> <li>• Support independent living and empower patients to take responsibility for their own health and self-management of their conditions. Number of avoided admissions per annum;</li> <li>• Embed a population health approach in all health and care services;</li> <li>• Number of reduced bed days per annum;</li> <li>• User and carer experience and quality of life;</li> <li>• Number of families accessing Early Help?</li> <li>• Breastfeeding rates at 6-8 weeks?</li> <li>• Access to mental health services?</li> <li>• Proportion of people with Learning Disabilities receiving their annual health check;</li> <li>• Self-reporting confidence in maintaining independent living/management of condition.</li> </ul>

Key Theme	Tackling the wider determinants of health and wellbeing
Why is this important?	<p>Cumbria is a large sparsely populated County made up of a number of towns and villages (many ex-industrial), a National Park, open expanses of countryside and the City of Carlisle. The geographical diversity exemplifies health inequalities across the county with life expectancy differing markedly depending on where you live.</p> <p>The lower population density in more remote areas also masks small pockets of significant deprivation and poor health outcomes.</p> <ul style="list-style-type: none"> <li>Action is required at a broader social, environmental and economic level around the wider determinants of health and wellbeing. This is about creating the conditions in which individuals can reasonably be expected to be healthy and to take action in support of their own health and wellbeing. It recognises that</li> </ul> <p>The factors that impact on people’s health and wellbeing go beyond their ability to access health and care services. A community is healthy and sustainable when it has:</p> <ul style="list-style-type: none"> <li><b>Natural assets:</b> A high quality natural environment that provides opportunities for engagement with the natural world. This includes taking action on reducing climate emissions and promoting use of green spaces</li> <li><b>Human assets:</b> People with the skills, knowledge and experience that give them the capacity to take part in society and have meaningful and fulfilling lives</li> <li><b>Social assets:</b> A good social infrastructure, with networks and institutions that allow people to connect to each other</li> <li><b>Physical assets:</b> a good physical infrastructure including housing, transport and a commercial environment that promotes healthy behaviors</li> <li><b>Financial assets:</b> adequate financial resources that are fairly distributed, underpinned by well-paid and secure employment</li> </ul> <p>A key feature of this framework is that it emphasises the importance of building all five types of community asset without degrading any of them. It sets a positive vision of building a better society in which everyone is able to maximise their potential for health and wellbeing.</p>
Priorities for immediate focus	<ul style="list-style-type: none"> <li>Reduce levels of poverty and income inequalities;</li> <li>Delivering improvement in air quality across Cumbria;</li> <li>Improving educational attainment for all young people across Cumbria;</li> <li>Availability of good quality housing that meets the needs of Cumbria’s people throughout their lives;</li> <li>To develop the physical transport infrastructure in Cumbria to make it a great place to walk and cycle.</li> </ul>
How are we going to measure progress	<ul style="list-style-type: none"> <li>% Low income households;</li> <li>Improvement in air quality to 40µg/m3 for NO2 andPM10;</li> <li>The number of Young People achieving level four qualifications;</li> <li>Proportion of houses built which are deemed to be affordable;</li> <li>Proportion of social and private housing in poor condition.</li> </ul>

Key Theme	Improving health and wellbeing throughout the life course
Why is this important?	<p>As we move through our lives, we are constantly adopting behaviours that can impact on the health and wellbeing of us as individuals, those we live and socialise with, as well as those we care for, including our children and people with disabilities.</p> <p>Even before we are born, the behaviours of our parents around factors such as diet and smoking can impact on our long-term health. The first 1000 days of life are a critical time when the foundations of optimum health, growth and neurodevelopment across the life course are established.</p> <p>Throughout childhood, our working lives and as we age, maintaining a healthy weight, being active and smoke/drug free, drinking alcohol within recommended levels and experiencing good mental wellbeing (including good social connections) are all important to maintaining good health.</p> <p>These factors used to be viewed as 'lifestyle choices', however we recognise that people's life experiences and the environments in which they live significantly influence their behaviours and the choices they are able to make. .</p> <p>Therefore, empowering people to take personal control and responsibility for their health and wellbeing requires a whole community approach.</p> <p>We need to increase opportunities to achieve positive change by supporting people and communities to build on their own skills and knowledge and their communities' assets - a move from preventing illness to promoting wellness; and from a 'doing to' culture to a 'doing with' culture.</p> <p>Community-centred approaches are key to building resilient and flourishing individuals and communities. Resilience reduces the impact that the stresses of life have on our wellbeing, keeping us happy, healthy and independent for longer.</p> <p>From the clinical perspective, there is increasing evidence and recognition that a 'More than Medicine' approach is required, which seeks to mainstream non-clinical interventions such as volunteering and community friendship groups. . This requires a culture change across health and social care to one in which alternative services accessed via social prescribing are seen as real alternatives to help people manage their own conditions better.</p>
Priorities for immediate focus	<ul style="list-style-type: none"> <li>• Improve mental wellbeing of children and adults;</li> <li>• Promoting breastfeeding;</li> <li>• Improving diet and tackling obesity;</li> <li>• Reducing the prevalence of smoking;</li> <li>• Drug use and unsafe alcohol consumption;</li> <li>• Reducing social isolation;</li> <li>• Promoting physical activity;</li> <li>• Reducing obesity and excess weight in children and young people.</li> </ul>
How are we going to measure progress	<ul style="list-style-type: none"> <li>• Childhood obesity levels across the county;</li> <li>• Levels of smoking;</li> <li>• Self-report measures of social connection and mental wellbeing (e.g. via coaching services);</li> <li>• District levels of physical activity;</li> <li>• Initiation and continuation of breastfeeding at 6-8 weeks;</li> <li>• Reducing obesity and excess weight in children and young people.</li> </ul>

