



Joint Health and Wellbeing Strategy

2020 – 2025

(a review will take place in 2021)





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Foreword

Welcome to the County Durham Health and Wellbeing Board's fifth Joint Health and Wellbeing Strategy.

The Health and Social Care Act 2012 required all upper tier local authorities to establish Health and Wellbeing Boards. The County Durham Health and Wellbeing Board was formally established as a committee of Durham County Council in April 2013.

As Chair and Vice Chair we are pleased to say that the Board have had a successful year, having worked to improve people's health and reduce health inequalities across the county. We have delivered on the six priorities in the JHWS 2016-19, and achievements aligned to these include:

- Increased number of businesses signing up to the county's Breastfeeding Friendly scheme
- Continuing downward trends in under 18 conceptions
- Introduction of the 'Active 30' programme in schools
- Delivery of the Youth Aware of Mental Health programme to secondary school pupils to help them cope with anxiety, depression and encourage them to make healthy lifestyle choices
- Delivering the Prevention at scale pilot, which focuses on mental health
- Significant reductions in smoking prevalence across the county
- Increased take up of screening for breast, cervical and bowel cancer
- Good performance in preventing delayed transfers of care from hospital
- Good proportion of people using social care saying that they have enough choice and control over the care and services they receive
- Further development of 'Dementia Friendly Communities'
- Development of the three-year Pharmaceutical Needs Assessment (PNA), which considers the health needs of the population and the provision of pharmaceutical services.

Moving forward, we continue to be supported by partners to deliver our vision to ensure County Durham is a healthy place, where people live well for longer.



Councillor Lucy Hovvels MBE

**Chair of the Health and Wellbeing Board
Cabinet Portfolio Holder for Adult and
Health Services**



Dr Stewart Findlay

**Vice Chair of the Health and Wellbeing Board
Chief Officer, North Durham and Durham Dales,
Easington & Sedgefield Clinical Commissioning
Group**



What is the Health and Wellbeing Board?

Health and Wellbeing Boards were established under the Health and Social Care Act 2012. This legislation gives the County Durham Health and Wellbeing Board specific functions as follows:

- To develop a Joint Strategic Needs Assessment (JSNA), which provides an overview of the current and future health and wellbeing needs of the people of County Durham;
- To develop a Joint Health and Wellbeing Strategy (JHWS), which is based on evidence in the Joint Strategic Needs Assessment;
- A responsibility and duty to encourage integrated working between commissioners of health services, public health and social care services, for the purposes of advancing the health and wellbeing of the people in its area;
- Power to encourage those who provide services related to social determinants of health to work closely with the Health and Wellbeing Board;
- To produce a Pharmaceutical Needs Assessment which looks at the current provision of pharmacy services across County Durham, and whether there are any potential gaps to service delivery.

County Durham Vision 2035

The County Durham Vision 2035 is a document developed with partners to provide a shared understanding of what everyone wants our county to look like in 15 years' time. It provides strategic direction and enables us to work more closely together, removing organisational boundaries and co-delivering services for the benefit of our residents.

The County Durham Vision 2035 contains three strategic ambitions to develop County Durham over the next 15 years:

- More and Better jobs
- People live long and independent lives
- Connected communities

The objectives contained under the vision ambition "People live long and independent lives" have a health focus and the JHWS also has an influence around the ambition for connected communities as well as the effect of poverty and deprivation on health. In addition, the JHWS will form part of the delivery mechanism for the Vision.

The JHWS will have a rapid review after a year to ensure full alignment with the County Durham Vision implementation and the partnership review. This will ensure that the priorities set out in the Joint Health and Wellbeing Strategy are fully embedded with the refreshed partnerships and delivery plan of the vision.

Health and Wellbeing Board's vision is underpinned by the JSNA and is:

**'County Durham is a healthy place, where
people live well for longer'**





County Durham Plan

The County Durham Plan sets out a range of development proposals as well as planning policies for the county until 2035. The plan presents a vision for potential housing, jobs and the environment until 2035 as well as the transport, schools and healthcare to support it. These will cover housing, businesses and jobs, protection of the historic and natural environment. They will also cover what should be put in place to support development, such as major transport links, new or expanded schools and healthcare provision and community facilities and will influence the delivery of this strategy.

Joint Strategic Needs Assessment

The Joint Strategic Needs Assessment (JSNA) helps to inform the planning and improvement of local services and guides us in making the best use of funding available. It builds a picture of current and future health and wellbeing needs of local people. This is used to shape joint commissioning priorities to improve health and wellbeing as well as reduce health inequalities in our communities. Over the last year our JSNA has been transformed to create a tool that is fit for the future and rooted in intelligence and wider evidence about what drives health and wellbeing across the county.

The development of assets within the JSNA is a key priority. By focussing only on the “needs” of local communities we do not acknowledge the importance of the assets or take account of the protective factors and strength within individuals and across communities. This should incorporate practical skills, capacity and knowledge of residents and the networks and connections in a community. In short it should cover:

- Where we live
- Our Services
- Our community

The JSNA is now part of Durham Insight which is a shared intelligence, research and knowledge base for County Durham, informing strategic planning across Durham County Council and its partners. This site includes in depth JSNA and Insight factsheets, health needs assessments, health equity audits and lots of topic-based intelligence including infographics, maps and story maps. New intelligence content is regularly added, and the site is continuously being developed and improved. www.durhaminsight.info

During 2019 recent additions to Durham Insight include JSNA factsheets on Special Educational Needs and Disabilities (SEND), and Children Looked After (CLA) plus the development of a vulnerable children’s landing page and infographics to support our new Primary Care Networks (PCNs).

The JSNA, along with the use of evidence and local conversations, helps us to focus on the most important issues for our communities across County Durham.

Building on our assets

County Durham has many assets that can support and protect health, some of these are set out below.



* A Cree is County Durham's version of Australia's Men's Shed. Crees aim to engage with those at risk of suicide by talking social isolation and self-harm through skill-sharing and informal learning to promote social interaction. Although Crees were originally aimed at men, some have developed for women and young people.

Evidence for our strategic priorities

Data and intelligence had been coupled with the evidence base and knowledge of local circumstances to prioritise the key areas of focus in the strategy.



Where are we in 2020?

The key health and factors which impact on health have been drawn out from the JSNA and utilised to inform the priorities for the Joint Health and Wellbeing Strategy.

This has been coupled with the major policy drivers for improving health and reducing health inequalities:

- Marmot Fair Society Healthy Lives
- NHS Long Term Plan
- Prevention Green Paper
- Future in Mind

Our strategy follows a lifecourse approach and is focussed not only on extending the length of life, but quality of life and reducing differences in health outcomes for our local residents.

Across County Durham there are major differences in the health that people experience and there remain differences between the health of local people and those across England. The JHWS is seeking to work with people to change these outcomes. The solutions to these differences are not to be found within health and care services alone and many other factors have an influence on people's health and wellbeing. These include the environment in which people live (including accessibility of the natural environment), access to a good education, housing, the food people eat, money and resources, family, friends and communities and good work. These are often called the social determinants of health.

These differences are unjust and unfair, and the Health and Wellbeing Board is committed to making a difference. The Board recognises that many of the social determinants of health require close working with key partners across County Durham who have responsibility for housing, schools and of course with our local communities.

One in four adults experience at least one diagnosable mental health problem every year and mental health problems represent the largest single cause of disability in the UK.

Mental health can have an impact on the quality of life, ability to work and sickness levels at work. Good mental health can also be a protective factor for good health in general. The scale of the issue and its impact on individuals, communities, economy and services is why mental health is an important cross cutting issue for the Health and Wellbeing Board throughout all our priorities.

Achieving our objectives will rely on close working with a range of partners over the length of this strategy and beyond and in support of the County Durham Vision 2035.



Health and wellbeing

Starting Well



78.2 81.5

Life expectancy at birth

Children born today can expect to live to **59** years old in good health.



1 in 4 reception children and **1 in 3** year 6 children have excess weight

That's around **900** babies a year.

This is *increasing* year on year



Nearly **18%** of mothers smoke while they are pregnant

Ageing Well

Over **17,000** people are supported by adult social care services provided by the Council.

... and **90%** reported that their care and support services helped them have control over daily life.



1 in 20 people over 65 are recorded as having dementia

The average age at which people are admitted to permanent residential care has *increased* by nearly **2** years over the last decade.

2 out of **3** social care users are satisfied with their care



Living Well



1 in 4 adults experience at least one diagnosable mental health problem in their life time...



1 in 10 children have a mental health disorder

... that's over **100,000** adults in County Durham in a given year.



47% of our population live in the 30% most deprived areas nationally...

... for children this rises to **54%**

There are fewer people than ever *smoking*, but *obesity* rates continue to rise.



Smoking prevalence has reduced to **15%** *14.4% nationally.*



2 in 3 adults are overweight or obese.



Our Strategic Priorities

The Health and Wellbeing Board adopts a lifecourse approach to its priorities, recognising the importance of mental health and wellbeing and the social determinants of health cutting across all our priorities. These priorities are:

- Starting Well
- Living Well
- Ageing Well

Starting Well

The experiences that children have early in their life play a key part in their health as adults. In County Durham, it is estimated that 1 in 10 (over 10,000) children have a mental health disorder and that a quarter of adults will experience at least one diagnosable mental health problem in their lifetime.

While we have made progress in recent years in providing opportunities for our children including a good level of development by the end of reception, reduction in teenage conceptions and levels of smoking our overall outcomes for children should and can be improved. This is even more so for children facing significant disadvantage or challenge.

The Health and Wellbeing Board will work closely with children and young people to ensure they start well and reduce health inequalities for children and their families.

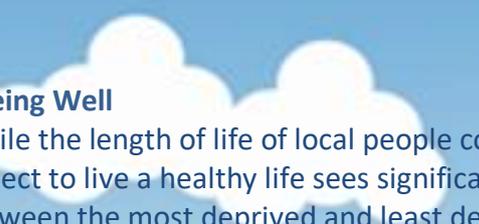
Living Well

We know that a good job, access to the natural environment, quality housing and opportunities for active travel, as well as ensuring our communities have optimum mental health and wellbeing, have a positive influence on our overall health and wellbeing.

Good work is vital for people's health and wellbeing, impacting both directly and indirectly on the individual, their families and communities. Healthier, active and engaged employees are more productive and have lower levels of sickness absence. We know that almost 19% of sickness absence is due to mental health and over 15 million days are lost to depression every year nationally, and local people who have significant health issues need support to overcome the barriers they face to accessing and retaining work. The gap in the employment rate between those with a long-term health condition and the overall employment rate is 19.5% which is significantly worse than England and increasing over time.

Having access to a warm, comfortable place to live; our work and financial situation; eating well and staying active make a difference to our chances of remaining healthy and well during this time of life and into older adulthood.

The Health and Wellbeing Board is committed to shaping a healthy place which is smoke free, supportive of a healthy weight and gives access to physical activity opportunities with good homes.



Ageing Well

While the length of life of local people continues to increase, the years that people can expect to live a healthy life sees significant differences across County Durham. The gap between the most deprived and least deprived areas within County Durham is 8.1 years for men and 6.9 years for women. This, coupled with an ageing population and people living with a range of health conditions, can affect people's ability to work and contribute to their communities and has an impact on our health and care services.

For some people, later life can be marked by disability, dependency and inequality rather than offering opportunities to continue leading a healthy and active life. The experience of later life is therefore deeply divided, especially along the lines of social class, relative deprivation, gender and ethnicity. These factors are strongly associated with the socio-economic conditions that shape earlier life, low income, or lack of supportive social networks. Long term ill health tends to be associated with later life and, as a result of population ageing, the need for health services is increasingly shifting from short-term, curative treatment to managing long-term conditions. The good news is that many of these conditions are preventable or at least can be delayed, through delivering on the priorities set out in this strategy, and by better shaping care and support around people and what matters to them.

We will also target approaches which enable our older people to remain independent and to lead lives with meaning and purpose and will ensure that when the time comes, people receive good quality end of life care and have a good death.

Alignment with other key strategic plans

The County Durham Health and Wellbeing Board takes a 'whole-system' approach to the health and wellbeing of our communities which requires coordination and collaboration across a wide variety of sectors. It is important that our priorities align to other plans to ensure our actions are delivered to meet the need of our local communities. Partners working across County Durham have developed a five-year County Durham Health and Wellbeing System Plan which identifies key programmes of work over the next five years for health and social care services. This provides the delivery plan for the health and care aspects of the JHWS

The County Durham 5-year Health and Wellbeing System plan is part of an Integrated Care Partnership which covers County Durham, Sunderland and South Tyneside which in turn is part of an Integrated Care System which covers the whole of the North East and Cumbria. This geography is shown at Figure 1.

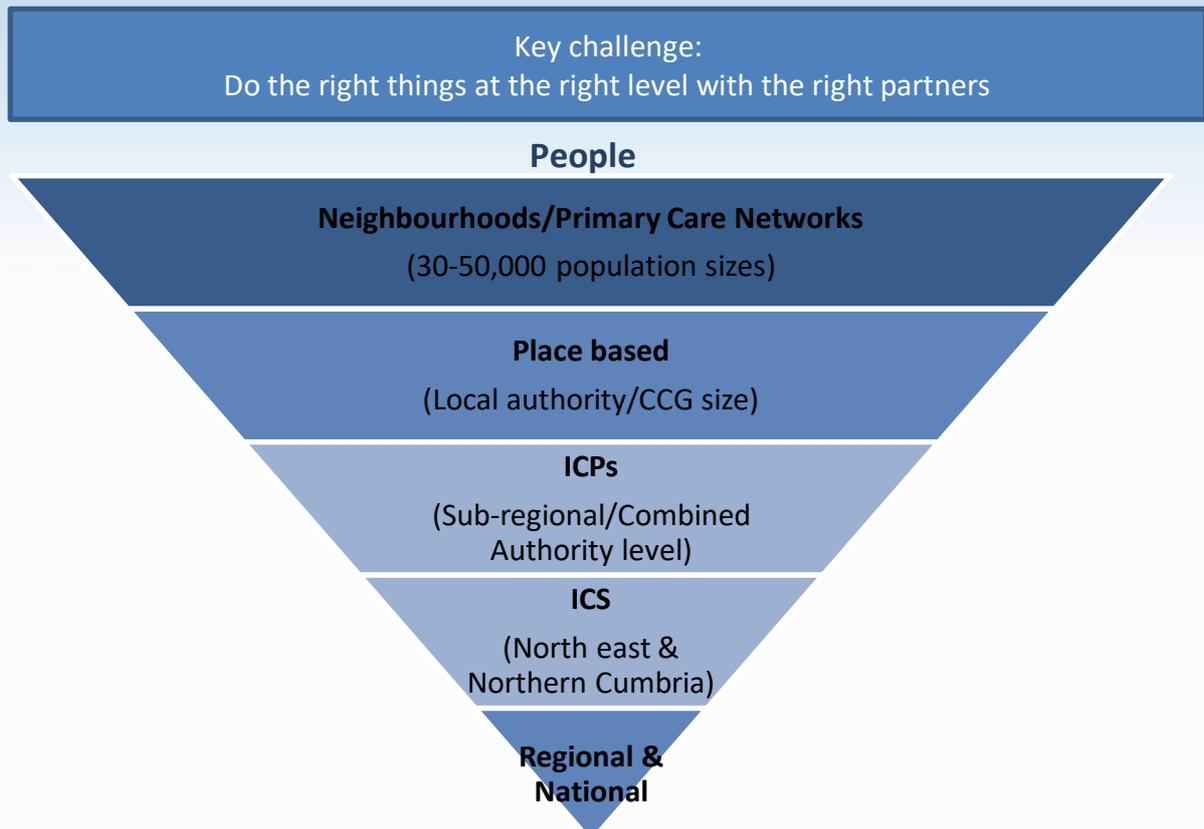
An integrated health and social care system has an important role to play in terms of early intervention by preventing or reducing needs from deteriorating by providing the right care at the right time in the community and putting more people in control of their health; supporting the whole person, across mental and physical health and not just treating symptoms.

County Durham, our 'place', has primacy and will be where the majority of services will continue to be commissioned, planned and delivered, whilst also recognising that we will

work together with our neighbours at scale where this genuinely adds value. The JHWS is about long-term health improvement and reducing health inequalities including the social determinants.

Please refer to Appendix 1 to see how the Joint Health and Wellbeing Strategy aligns to other plans.

Figure 1: Geographies - Integrated Care System, Integrated Care Partnership, Place based and Primary Care Networks



Our objectives

We have chosen six objectives across our three strategic priorities, that are of importance given the impact they have on people's health and of where we want to be in 2025. We recognise these are challenging but by working together across our partnerships and local communities we can make a difference.

- Improve healthy life expectancy and reduce the gap within County Durham and between County Durham and England
- We will have a smoke free environment with over 95% of our residents not smoking and an ambition that pregnant women and mothers will not smoke
- Close the gap in the employment rate between those living with a long-term health condition, learning disability, in contact with secondary mental health services and the overall employment rate
- Over 90% of our children aged 4-5 years, and 79% of children aged 10-11 years are of a healthy weight
- Improved self-reported wellbeing
- Increase the number of organisations involved in Better Health at Work Award

What changes can you expect to see?

Our ultimate goal is reducing the gap in healthy life expectancy within County Durham and between County Durham and England. This Strategy is focused on the foundations for achieving that goal. We have set out a number of changes you can expect to see throughout the course of this strategy to set the foundations for achieving this.

By 2022:

- Increase in breastfeeding friendly venues and organisational workplaces across County Durham that meet UNICEF Baby friendly Initiative Standards
- Increasing the equity of cancer screening programmes
- 10% reduction in suicides
- More businesses signing the Time to Change pledge to reduce mental health stigma and discrimination
- Increased referrals and adaptations done by the warm and healthy homes programme

By 2023:

- A reduction/downward trend in hospital admissions of children under 2 years of age, due to unintentional injuries
- Increase in patients seen with face to face second contact within 9 weeks of referral to CAMHS
- Fewer applications for takeaways near schools
- More businesses signing up to the Better Health at Work Award to improve health interventions at work
- More adult carers having carers assessments

By 2024:

- Child development outcomes at age 2 to 2.5 years will be 90%
- Increase in the number of physical health checks for those people with a mental health condition or a learning disability
- More mental health champions across workplaces
- Reduce the under 75 mortality rates from preventable cancers and a reduction in the size of the gap in preventable cancer mortality between County Durham and England

By 2025:

- Improve healthy life expectancy and reduce the gap within County Durham and between County Durham and England
- We will have a smoke free environment with over 95% of our residents not smoking and an ambition that pregnant women and mothers will not smoke
- Close the gap in the employment rate between those living with a long-term health condition, learning disability, in contact with secondary mental health services and the overall employment rate
- Over 90% of our children aged 4-5 years, and 79% of children aged 10-11 years are of a healthy weight
- Improved Self-reported wellbeing
- Increase the number of organisations involved in the Better Health at Work Award

Approach to Wellbeing

There are many definitions of wellbeing, but in short it can be described as *'how well we are doing'* or *'how satisfied we are with our lives'*. As well as health, measures of wellbeing include our relationships; our work and finances; our levels of participation in sport, culture and community events, where we live and how safe we feel; and the services we can access. Wellbeing is starting to be an equivalent measure to economic growth, ensuring that we consider these important factors in people's lives alongside factors influencing economic development.

Wider influences such as finances, home, education, climate and environment can all have an impact on the health of our communities. However, communities also possess a number of assets available to them that help maintain and build their resilience and which in turn can protect challenges to their health or wellbeing.

Initiatives intended to encourage inclusive growth and improvements in wellbeing are founded on the engagement of communities and the devolution of power. County Durham has been at the vanguard in developing such approaches, engaging communities and sharing decision making through Area Action Partnerships. These have been operating since 2009, originally designed to give people a voice in how local services are provided. We know that this can make a difference and can build on these to close the gap and not leave people behind.

This approach to wellbeing is a key way of implementing the County Durham Vision and we will deliver this strategy together with our communities. We will operate to the following principles of working in order to improve the wellbeing of our residents:

- Solutions will be designed and produced together with service users
- We will work with communities and support their development and empowerment
- We will acknowledge the differing needs of our communities whilst acknowledging and building on their potential strengths
- We will direct our activities where they can make the biggest difference to those who are most vulnerable and help to build resilience
- We will make person centred interventions available, ensuring that they are empowering and not stigmatising
- We will align our related strategies, policies and services to reduce duplication and ensure greater impact.

Many long-term diseases in our population are closely linked to known behavioural risk factors. The approach to wellbeing, making every contact count and social prescribing are ways we can approach behaviour change, recognising that actions can be seen as additions, rather than choice, that utilise the millions of day to day interactions that organisations and people have with other people to encourage changes in behaviour that have a positive effect on the health and wellbeing of individuals, communities and populations.

This is shown at Figure 2.

Figure 2: Approach to Wellbeing



Starting Well

People and Place



There are around
106,000
0-18 year olds.

There were nearly
4,900
births in 2018



140
babies born with
low birth weight.



Around **900**
babies were born to
mothers who
smoke.

Nearly **1 in 5**
women were
smoking at time of
delivery.



78.3 81.4
Life expectancy at
birth



Nearly **1 in 3**
mums breastfeed 6-8
weeks after birth

Health and Wellbeing



3 in 4
5 year olds are free from
tooth decay.



1 in 4
4-5 year olds have excess
weight.



Hospital admissions caused
by unintentional injuries in 0-
4 year olds is
significantly higher
than England.



The rate of teenage
conceptions has
decreased by
45% since 2010

Education



There are nearly **80,000** school age
children living in County Durham.

There are around **10,400**
children attending state
schools with special
educational needs.

9 out of 10 children are achieving a good level of
development at 2-2 ½ years old.

6%
of 16-17 year olds are
not in education,
employment or training.

Vulnerable children



As at March 2019
there were **800** children
looked after in County
Durham.



Nearly **1 in 4**
children are living in
income deprived
households.

The rate of hospital admissions for
10-24 year olds as a result of self-
harm is **similar to**
England.

1 in 10
children have a
mental health
disorder.

Strategic priority 1: Starting Well

Why is this important?

Starting well begins with a baby's mother and family being healthy before, during and after pregnancy. The first 1001 day in a child's life is fundamental to providing the best start in life during which the foundations of a child's development are laid.

Childhood is the springboard to a successful adulthood. It is the foundation on which our lives are built. We will provide the best support to expectant mothers and mothers of newborn babies, their children and their families. For our vulnerable children and families, we will provide a more targeted offer of support to reduce inequalities and improve their health and wellbeing. This includes supporting our children and young people with Special Educational Needs and Disabilities to achieve the best possible outcomes.

Better outcomes for children cannot be achieved through health and social care service intervention in isolation. How children live, learn and play are all key drivers of healthy development. Other social factors including poverty, poor housing and unstable employment and poor access to green space and community connections act against the ability of parents and families to create a safe, healthy and nurturing environment for their children. Parenting is critical to a child's development and evidence shows children who are exposed to adverse events such as domestic abuse or alcohol misuse can be affected negatively, both physically and mentally, throughout their adolescence and into adult life. These factors all determine whether a child will be more likely to thrive and achieve their optimum potential in life.

We will improve health and wellbeing outcomes for all children and young people and help children and their families achieve and maintain their optimum mental health, resilience and wellbeing.

In addition to the direct feedback on health issues from young people to the Health and Wellbeing Board, we will look to coproduce work with children, young people and their families, for example in relation to mental health services.

The Children and Young People's Strategy provides focus and clarity on the priorities for improving services and life opportunities for children and young people. The Health and Wellbeing Board will provide strategic oversight to ensure that improved health and wellbeing outcomes of our children is delivered within this strategy, including reducing unacceptable inequalities, which our more vulnerable children encounter like unintentional injuries in the home or being an unhealthy weight.

Starting Well: This priority covers the early years of life from conception to young adulthood and includes pregnancy, birth, and childhood

- Improve the quality, responsiveness and equity of access to our services to meet the needs of all children and young people, including those who have special educational needs and disabilities, by considering their family and community
- Identify perinatal mental health issues during the antenatal period and embedded pathways for support into practice
- Develop the national trailblazer for mental health support teams in identified schools
- Work within Education, Children's Services and universal health services to improve the workforce's ability to understand mental health, and where appropriate undertake a brief intervention and signpost or refer accordingly.
- Support women to achieve a smoke free pregnancy through whole system change and tackling tobacco dependency in pregnancy as an addiction not a lifestyle choice
- Support spatial policy and regeneration programmes which aim to improve health and reduce health inequalities
- Develop and implement the Health and Wellbeing Framework for education settings to improve the health of children
- Support women to initiate and continue breastfeeding their babies through the County Durham 'Call to Action'. To change the culture of breastfeeding in our county, whilst promoting and maintaining UNICEF Gold Baby Friendly Accreditation within key services
- Develop a countywide offer around physical activity and good nutrition including addressing the issues of holiday activities specifically targeting vulnerable communities and health inequalities
- Reduce preventable unintentional injuries among children and young people and reduce inequalities, through the implementation of the County Durham Prevention of Unintentional Injuries Framework
- Consider a range of population approaches to improving children's oral health across County Durham including community water fluoridation
- Increase the roll out in schools of 'poverty proofing the school day' which includes cutting the cost of the schools' day
- Support the effective transition of identified vulnerable young people aged 14+ towards adulthood and their transition to adult services where required
- Improve speech, language and communication outcomes for children across the County to support school readiness

Delivery plan mechanisms:

1. Best Start in Life Steering Group action plan
2. County Durham Tobacco dependency in Pregnancy steering group action plan
3. Children and Young People Mental Health, Emotional Wellbeing and Resilience Local Transformation Plan
4. Special Educational Needs and Disabilities Strategic Partnership written statement of action
5. Oral Health Framework
6. Unintentional Injuries Framework
7. Healthy Weight Alliance Framework

Living well

Our people and place



317,000

18-64 year olds



74.2% are in employment.

This has increased **7.5%** since 2016.



Nearly **50%** of our lower super output areas are in the top 30% most deprived areas nationally.

The gap in employment rate between those with a learning disability and the overall employment rate is **70** percentage points.

Living in poor health



An estimated **1 in 12** have diabetes.



Over **20,000** people have coronary heart disease.



1 in 5 people are diagnosed with high blood pressure.

Mental Health and Wellbeing

1 in 4 adults experience at least one diagnosable mental health problem in any given year.



Nearly **57,000** adults have been diagnosed with depression.



Less than **60** deaths a year from suicide.

1 in 5 people say they have high levels of anxiety.



1 in 10 people¹⁹ say they do not feel happy.

Risk taking behaviours



Around **2 in 5** adults are physically inactive.



... and **2 out of 3** adults are classed as overweight.



15% of adults are smokers. *14.4% nationally.*



12,500 people were admitted to hospital in 2017/18 for alcohol related conditions.



91.9 per 100,000 people aged 15-24 years admitted to hospital for substance misuse.



2,954 people were diagnosed with a sexually transmitted infection in 2018.

Strategic priority 2: Living Well

Why is this important?

Good health is important at any age. While the length of life of local people continues to increase, the years that people can expect to live a high quality of life sees significant differences across County Durham. The gap between the most deprived and least deprived areas within County Durham is 8.1 years for men and 6.9 years for women. This coupled with an ageing population and people living with a range of health conditions can affect people's ability to work and contribute to their communities and has an impact on our health and care services.

We will work with businesses to help create a healthy community by offering employment and creating healthy workplaces to help ensure they retain their staff, attract new talent and help to keep the communities they work within, healthier. We will also support businesses to implement effective preventative strategies, not only to promote better mental health but also help avoid the costs of absenteeism and reduced productivity which are associated with poor mental health.

The links between an improved environment and improved health and wellbeing are clear. We will work with partners and communities to maximise the quality of our local environment and clean air, with opportunities to be physically active and achieve a healthy weight. We will encourage transport choices that are the most sustainable by improving the attractiveness of these modes of transport for everyday journeys. The Health and Wellbeing Board will provide strategic oversight to ensure that improved health and wellbeing outcomes for our residents are delivered within this strategy, including promoting high quality natural and formally managed open spaces for recreation, food growing and exercise. We will work with partners to put support in place to encourage sustainable 'active travel', modes of transport that use the human body as power, such as cycling and walking, to get from place to place.

Housing condition can influence our physical and mental health, for example, a warm and dry house can improve general health outcomes and specifically reduce respiratory conditions and good housing promotes positive mental health.

We will enable our local communities to increase people's skills, knowledge and confidence to look after their own health and wellbeing. We will encourage people to eat healthily by promoting the five a day message and increase their physical activity.

In County Durham, we recognise that for many people not smoking, having a healthy weight, being physically active, drinking moderate levels of alcohol and having good and supportive relationships is not a choice but shaped by the environment in which they live. We will adopt a 'settings' approach which creates an environment for healthy behaviours, including schools, workplaces, green spaces, community centres and primary care so people can live well.

We will strive to shift the culture and influence policy and legislation to support improving people's health, for example, minimum unit pricing for alcohol.



The contribution of citizens, users and families to improving health outcomes is central to co-production. It values what works well in an area, it sees the potential of people's knowledge and moves away from a deficit approach to recognising the assets people already have and can contribute to their neighbourhood.



Living Well: This priority covers adulthood, from leaving school/university to retiring and includes our working life

- Work with a range of partners to deliver Making Every Contact Count to enable every contact to be a health contact
- Ensure opportunities for service users and their carers to be involved in the development and co-production of services are maximised
- Implement the approach to wellbeing which builds on the positive work in communities and involves communities in decisions about services
- Develop our countywide approach to reducing stigma and discrimination across communities, workplaces and schools though working with the Time to Change hub
- Develop a healthy settings approach to support health improvement and reduced health inequalities across a range of settings, including early years schools, workplaces, pharmacies, leisure facilities and voluntary and community sector organisations
- Better identify the rate of self-harm and reduce the levels of suicide across County Durham
- Reduce the prevalence of harm caused by smoking through tobacco control measures and redesigning the stop smoking service to improve the services to tackle tobacco-related ill health
- Develop a Sexual Health Strategy for County Durham to ensure equitable access and a strategic focus on reducing sexually transmitted infections and good contraceptive health
- Support the drive for a minimum unit price for alcohol to create a County Durham that has reduced harm from alcohol
- Increase the use of active travel to encourage physical activity (including cycling and walking) to reduce traffic emissions related respiratory illness and carbon emissions
- Increase the uptake of national/local screening programmes and work to address inequalities in access and outcomes
- Help people to manage their own long-term conditions including diabetes and respiratory conditions through self-management programmes through a range of methods, including digitally, to access advice, self-help in minor illnesses and health promotion
- Attract more businesses and the voluntary and community sector to participate and achieve the Better Health at Work award including encouraging organisations to sign the Time to Change Employer pledge
- Increase the number of organisations using the volunteering kite mark, which is managed by Durham Community Action
- Implement strategies for vulnerable population groups, for example, those with learning disabilities and autism.
- Develop initiatives for community home treatment as an alternative to crisis services
- Ensure procurement processes encourage providers to have a focus on health within the workplace
- Work with the Economic Partnership to maximise local opportunities for economic and job development, including apprenticeships, with a focus on closing the gap in employment opportunities for those with a long-term health condition or disability
- Implement initiatives to support individuals to develop healthy eating habits and take part in physical activity

- Contribute to the implementation of the Housing Strategy where this relates to housing and health include accommodation services for people with the most complex needs
- Raise awareness of benefits to health from the perspective of an appropriate work life balance, in helping manage stress and anxiety

Delivery

plan

mechanisms:

- 1. Tobacco Control Alliance Action Plan**
- 2. Healthy Weight Alliance Action Plan/Active Durham Partnership Framework**

- 3. Resilient Communities Action Plan**
- 4. Sexual Health Strategy (when completed)**
- 5. County Durham Health and Social Care 5-year plan**

Ageing Well

People and Place



110,000

people aged 65 and over.

The proportion of older people in the population is expected to increase.

By 2035...

31% increase for over 65's

82% increase for over 85's

Life Expectancy (LE) and Healthy Life Expectancy (HLE) is **significantly lower** for County Durham than England for men and women.



Wome

LE is **81 years...**

HLE is **58 years.**

That's **23 years** in poor health



Men

LE is **78 years...**

HLE is **59 years.**

That's **19 years** in poor health

There is **inequality** in **premature mortality** across County Durham as rates are higher in the more deprived areas.

Health and Wellbeing



1 in 20 people over 65 are recorded as having dementia... nearly **5,000** people

... this is predicted to **double** over the next 15 years.



Just over **71%** of over 65's had a flu vaccination in 2018/19.

... this is just below the 75% benchmark.



The number of emergency admissions to hospital for falls is **increasing**.

Nearly **2,500** in 2017/18

Contributing factors



4.3% of the county's over 60's are living in income deprived households.



Over **30,000** people over the age of 65 live alone.



In 2018/19, **94.6%** of the Durham residents reported that their care and support services helped them have a better quality of life.



Permanent admission rates to residential and nursing care homes for over 65's are **significantly higher** for County Durham than England.

Strategic priority 3: Ageing Well

Why is this important?

Ageing well is something that happens throughout our lives, not just in old age: Starting and Living Well contribute as much if not more to ageing well as anything that happens later in life.

Older people in the county play a vital role in contributing to the life of their communities, and increasing numbers are continuing in paid employment well past State Pension age as well as volunteering and playing an active role in their local communities. However, older people can also be at increased risk of poverty (including fuel poverty). We need to work closely with the Poverty Action Group and ensure the best possible take up of benefits to improve people's health and wellbeing.

However, with age comes the increased likelihood of living with one or more long term conditions and/or sensory impairment. We will integrate commissioning between health and social care for more effective integrated service delivery where it makes sense to do so. We will seek to understand the opportunities at every stage of the development and delivery of joined up health and care services.

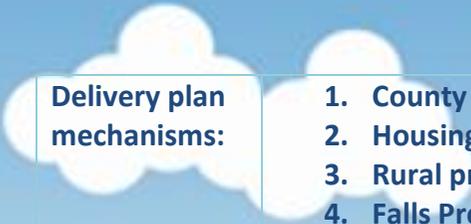
Older people have an increased risk of dementia and large numbers of older people suffer from depression and are also vulnerable to social isolation and rural isolation.

We will also target approaches which enable our older people to remain independent and to lead lives with meaning and purpose and will ensure that when the time comes, people receive good quality end of life care and have a good death.



Ageing Well: This priority covers additional actions in later life, noting that ageing begins at birth

- Promote the uptake of the flu vaccinations including flu, pneumococcal and shingles through marketing campaigns and collaborative, place-based working across County Durham.
- Review and strengthen the County Durham Dementia Strategy, particularly in regard to prevention
- Ensure dementia is identified and diagnosed at an early stage and families, carers and communities are helped to manage their condition
- Following the success of early adopters, increase the number of communities across the County who are empowered to become dementia friendly communities, with support from Dementia Action alliance, Alzheimer's Society and AAP's where engaged
- Work with partners and providers to reduce the incidence of falls and fractures in older people through age appropriate development in the built environment, training and digital technology
- Work with providers to increase the offer of fit for purpose sustainable housing stock to enable occupancy of residents into later years
- Develop housing and care options specifically to meet the needs of the older and disabled people within our communities
- Increase the scale and integration of out of hospital services, based around communities and improve population health outcomes
- Ensure the frail elderly are able to live well at home for as long as possible and receive high quality, consistent levels of service
- Increase referrals and adaptations done by the warm and healthy homes programme
- Support carers in their caring role so they are able to maintain their own health and wellbeing
- Support community connectivity and the approach to wellbeing to help address social isolation and loneliness
- Consider rural proofing for health in policy, planning and commissioning of services
- Implement the approach to wellbeing which builds on the positive work in communities and involves communities in decisions about services
- Work with Primary Care Networks to ensure social prescribing provides sufficient opportunities for people to access the help they need
- Improve the end of life pathway to ensure providers aspire to delivering support to people at the end of their life to deliver personal, bespoke care.
- Identify opportunities for intergenerational experience, learning and skills sharing in communities
- Undertake Health Equity Audit of Care Connect with a view to making the most of opportunities to promote health and wellbeing
- Explore opportunities to promote Making Every Contact Count in domiciliary care
- Ensure work on economic inclusion takes account of the greater proportion of older people in the population



Delivery plan mechanisms:

- 1. County Durham Health and Social Care 5-year plan**
- 2. Housing Strategy**
- 3. Rural proofing Strategy – To be developed**
- 4. Falls Prevention Strategy**

- 
- 5. Dementia Strategy**
 - 6. Palliative and End of Life Care Strategy**
 - 7. Poverty Action strategy**

Enabling factors

There are a number of enabling factors that are relevant to all actions in this strategy to ensure that it is delivered.

Leadership and Advocacy

- Make health and wellbeing everyone's business through cross-sector capacity building
- Promote key health messages through strategic influence, advocacy and PR

Whole System Approach

- Multiagency working across County Durham to achieve the best outcomes to address health and wellbeing needs in an efficient and sustainable way
- Commission and deliver high quality, safe and integrated health and wellbeing services
- Strong partnership governance arrangements
- Effective communications and information sharing across partners and communities

Strategic focus on prevention and early help

- Encourage a resource shift towards prevention and early intervention for people to remain as independent as possible making the best use of resources
- Adopt a whole family approach and recognising the roles played by carers and significant others

Performance management and intelligence

- Use Joint Strategic Needs Assessment and Durham Insight to support analytical view of priorities for health
- Population Health Management
- Use the best available evidence to address local needs including accessing data to identify areas where targeted intervention is required to inform commissioning decisions

Targeted Approach

- Appropriate, systematic, coordinated and targeted interventions to improve the health and wellbeing of the most and disadvantaged groups fastest

Community Engagement

- Meaningful engagement with local communities, patients, service users, carers and the public in commissioning and delivery of health and wellbeing services
- Empowering and enabling communities and individuals to take responsibility for their own health and wellbeing
- Utilise community assets

Workforce

- Ensure staff have the right knowledge, skills and competencies

Co-production

- Services are co-designed and co-produced with the people who need them, as well as their carers

Equitable access

- Everyone has the same opportunities to access health and social care services

Performance Management Framework

High level measures of success will be monitored through changes in life expectancy, healthy life expectancy and the life expectancy/healthy life expectancy gap between the most and least deprived communities.

The Health and Wellbeing Board will develop a set of performance indicators to measure the success of achieving the objectives and priorities in this strategy. Delivery of the actions in this strategy is by the Health and Wellbeing Board working with other partnership and the Health and Wellbeing Board sub groups who are responsible and accountable for the actions within this strategy.

Appendix 1: JHWS priorities and links to other strategic partnership plans

Joint Health and Wellbeing Strategy priorities and alignment to other Strategic Partnership Plans			
Joint Health and Wellbeing Strategy 2020 - 2025	County Durham 5 Year System plan 2020 - 2025	Children and Young People's Strategy 2019 - 2022	Safe Durham Partnership Plan 2020 - 2025
Starting well	<p>Prevention</p> <p>Children and Young People's Strategy</p> <p>Children and Young People's mental health</p> <p>Learning disabilities</p>	<p>Young people gain the education, skills and experience to succeed in adulthood</p> <p>All children and young people have a safe childhood</p> <p>Children and Young People enjoy the best start in life, good health and emotional wellbeing</p> <p>Children and young people with SEND achieve the best possible outcomes</p>	<p>Supporting victims and protect vulnerable people from harm</p>
Living well	<p>Primary care</p> <p>Urgent care treatment centre review</p> <p>Development of place based 0-25 services</p> <p>Workforce</p> <p>Out of hospital care</p> <p>Urgent & emergency care</p> <p>Planned care</p>		<p>Promote being safe and feeling safe in your community</p> <p>Reduction of alcohol and substance misuse</p>
Ageing well	<p>End of Life</p>		

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