



## What is in this Strategy

- A reminder of the previous strategy (2013-18) what it achieved
- A reminder about what Health and Wellbeing Boards are here to do
- A summary of the Key Health and Care Issues that affect Staffordshire
- Our new Approach

This Strategy is a call to action





We still have a lot to do to make this happen





## **Looking Back**

Living Well in Staffordshire
The Previous Strategy (2013-18)







# Thinking about the Lifecourse

Starting well	Growing well	Living well	Aging well	Ending well
Giving children the best start	Maximising potential and ability	Making good lifestyle choices	Sustaining independence, choice and control	Ensuring care and support at the end of life
1. Parenting 2. School readiness	3. Education 4. NEET (Not in Education, Employment or Training) 5. In care	6. Alcohol 7. Drugs 8. Lifestyle and mental wellbeing	9. Dementia 10. Falls prevention 11. Frail elderly	12. End of life

The focus was on how we prevent ill health

# What have we done & what are we doing?

#### What have we done?

- Successfully focused on work with Children and Families
- We have learnt from using public health funding to deliver Locality Commissioning
- We have and are working with District Councils
- We have started to open up conversations with the public
- We have explored approaches that identify and help isolated older people
- We have developed and implemented our Alcohol and

### What are we doing?

- Developing an approach to considering health in all our decisions making (Health in All Policies)
- Developing a Place based approach working with District Councils, Local GP Groups and Communities
- Championing work to reduce physical inactivity



## A statutory duty

What Health and Wellbeing Boards are expected to do



### Things that the Health and Wellbeing Board must do

- 1. We must receive reports to help us understand the key health and care issues in Staffordshire. We do this through a document called the "Joint Strategic Needs Assessment" (JSNA).

  https://www.staffordshireobservatory.org.uk/publications/healthandwellbeing/yourhealthinstaffordshire.aspx#.WY2YxeSWzIU)
- 2. We use this information to develop a strategy (like this one). We also ensure that organisations in local government and the NHS take account of the strategy when they prepare their plans.
- We aim to bring organisations together by encouraging organisations to share budgets, and to cooperate when they buy health and care services.
- 4. We will talk to the public and to have more honest public discussions about what affects health and wellbeing, and what is affordable in future.
- We ensure that health and care services are accountable to your elected representatives (Councillors).



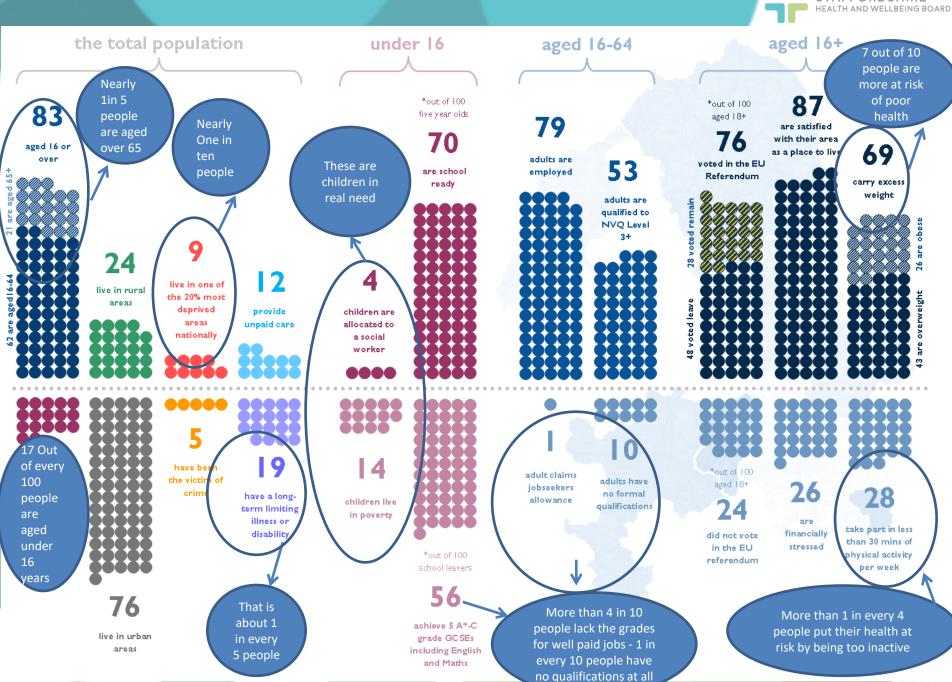


## Staffordshire in detail:

What do we know









# Start Well & Grow Well The issues

Insight tells us that for every 100 children in Staffordshire the majority will be growing up in stable, loving households. However, of the same 100 children:

four have a social worker fourteen live in poverty

fifteen have a disability or special educational needs



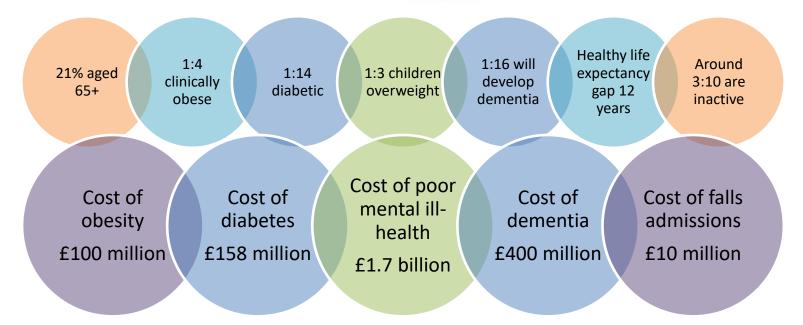


two will have been impacted by domestic abuse, parental mental health issues or parental substance misuse

Insight, Story of Staffordshire 2016



# Grow Well & Live Well The Issues



- About 40% of ill-health can be prevented if more people stop smoking, drink less, eat more healthily and get active.
- There are significant differences in health across the county; people from communities where people work, have good education and good jobs tend to live about 6 years longer, and have an extra 12 years in good health, than people from communities where people have less qualifications, low skilled jobs or are unemployed.
- These Health inequalities matter because of the greater need for services that come from areas of higher need

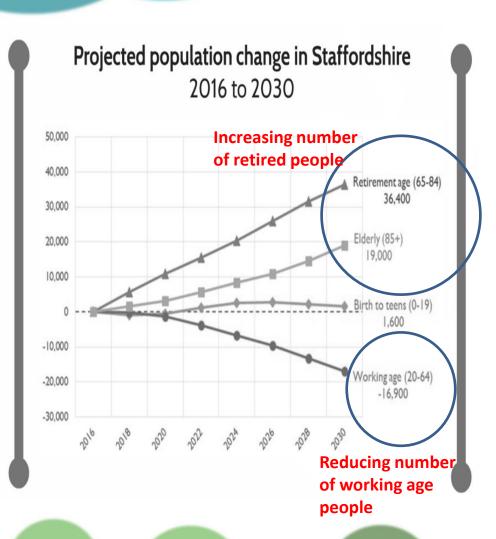


# Age well The issues

In Staffordshire, a man born today can expect to live for **80 years** and a woman can expect to live for **83 years**.

People can expect to reach 64 years of age before their health issues start to become a problem. This means that people spend nearly a **quarter of their lives** (15-20 years) in progressively **poorer health**. A growing number of people have

- one or more long-term conditions (e.g. diabetes, heart disease)
- many long term conditions are caused by unhealthy lifestyles choices
- we know that half of people aged over 65 have a limiting long-term illness which restricts their daily activity.
- we are also seeing a significant rise in the number of people with dementia; in Staffordshire we expect to see nearly 15,000 people with dementia by 2025.

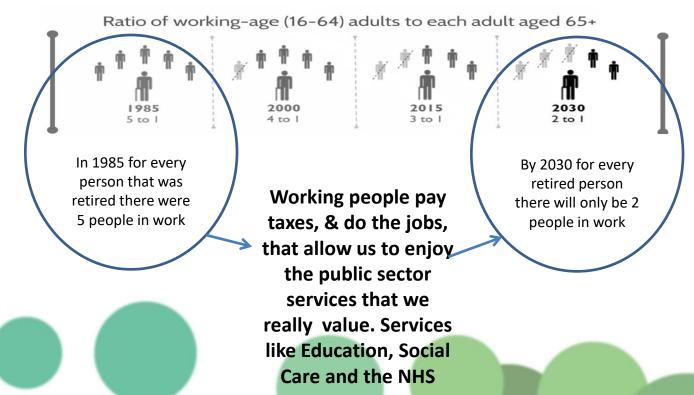




### The current system is unaffordable

The ageing population will have huge implications for health and care services:

- Demand for health and care services is already putting a significant strain on the system
- There is a reducing pool of people of working age to pay for people in their retirement
- There is a reducing pool of people who will work in health and social care services.





### What does all this tell us?

- We have unprecedented and growing DEMAND for health and care services
- 2. This demand is down to the increasing AGE of our population, but is made worse by modern LIFESTYLES
- We cannot continue to AFFORD health or care services we all need to find NEW WAYS of doing things...
- 4. ...this means that people across Staffordshire will need to take more CONTROL of their own health and lifestyle choices because they understand that this is easier than living for many years with a limiting illness that stops them living a full and enjoyable life.
- 5. Public sector services have a duty to SUPPORT this by creating a healthy environment that helps people to live more healthily.



### We need to do better

A new approach





# Why a new strategy?

- We have a statutory duty to deliver a Health and Wellbeing Strategy, this is an opportunity for us all to tackle some of these really big problems
- We want to build upon previous, Living Well strategy
- This strategy reflects the fact that the world has moved on since 2013
- We need to develop a new approach across a wide range of different organisations



# Our approach

Starting well	Growing well	Living well	Aging well	Ending well
Giving children the best start	Maximising potential and ability	Making good lifestyle choices	Sustaining independence, choice and control	Ensuring care and support at the end of life
Parenting     School     readiness	3. Education 4. NEET (Not in Education, Employment or Training) 5. In care	Alcohol     Drugs     Lifestyle     and mental     wellbeing	9. Dementia 10. Falls prevention 11. Frail elderly	12. End of life

To help more people to stay as well as they can for longer

All organisations heading in the same direction



# Our approach

Outcome	Measure	Method
To help people to stay as well as they can to reduce the growing pressure on services	More people living beyond age 64 in good health	By talking to people about how they can take a bigger role in staying healthy by improving their knowledge their lifestyles and their mental health



### Taking Responsibility & making it happen

#### **INFORMATION**

- 1. We will improve data sharing between organisations to improve how we find people, who are likely to have poor health, to help them stay healthy and well
- 2. We will use modern approaches like smartphone apps to help us

#### **CONVERSATIONS**

- 1. We will actively talk with the public about health and what matters to them
- 2. We will seek to mobilise public support to reduce the growing pressure on public sector services
- 3. We will have conversations with workplaces about being healthy

Healthy Lifestyles Mental Wellbeing

#### **DECISIONS**

- 1. We will make sure that Health is included in all of our Policies and decisions
- 2. We will work with the private sector to help us improve health and well-being.

#### **COMMUNITIES**

- 1. We will help people to understand what is available in their neighbourhood to help them to stay well.
- 2. We will encourage and support people to stay well in their own communities.
- 3. We will encourage our staff to have conversations in communities to help people take more control over their health

# What we all need to do to promote and encourage greater personal responsibility

- We need to identify work and projects that will help us to help people to stay well for longer (Plan)
- We need to make sure that the Health and Wellbeing Board is able to deliver and has the right membership
- 3. We will hold the system to account for delivery against this priority (measure)
- 4. We will make sure that we talk, much more, with you the public.





# Our challenge

To develop good relationships with all our partners

To act as the focus for prevention and wellness across the system

Communities – people helping people

Voluntary sector

Retailers

Planners

Families Strategic Partnership

Housing

**HWBB** 

To help more people to stay as well as they can for longer



Private Sector – corporate social responsibility

Employers and their workforce

Dept Work & Pensions

Providers of services e.g. Hospitals / GPs

**STP** 

Schools

Leisure Industry

Highways

# How will we know that we have succeeded?

Our ambition: To increase by **X** the amount of time people can stay well and avoid long term health conditions

We will track this by developing our measures. They may include things like:

- 1. Helping people of all ages to stay mentally well
  - Reductions in Social Isolation
  - Children's Emotional Health and Wellbeing
  - Vulnerable People (e.g. Homeless)
- 2. Supporting people of all ages to have more healthy lifestyles
  - Increase Physical Activity
  - Reductions in Obesity
  - Continued reductions in Smoking
  - Reduction in Falls

