

Health & Wellbeing Strategy 2019 - 2022



You, Your Health and Us



11 leading organisations have formed a partnership aimed at working together to improve the lives of residents in the East Riding through wellbeing, health and care.

The partnership comprises City Health Care Partnership CIC, East Riding GPs, East Riding Voluntary Sector leads, East Riding of Yorkshire CCG, East Riding of Yorkshire Council, Healthwatch, Hull University Teaching Hospitals NHS Trust, Humber Teaching NHS Foundation Trust, Humberside Fire and Rescue Service, Humberside Police, and Yorkshire Ambulance Service

Foreword

Welcome to our new Strategy for 2019-22. A lot has changed since we launched our last strategy, including the recent launch of the NHS Long Term Plan, the national introduction of Sustainable Transformation Partnerships and more recently, emerging Integrated Care Systems (ICS). These are both part of the national policy response to the challenge of demand for health, wellbeing and social care related services continuing to grow significantly faster than the funding available.

Locally, the pressure on resources across the multi-agency wellbeing, health and care system (the System), is substantial. It comes at a time of continuing increases in demand from the whole population but particularly vulnerable people and a substantial growth in the number of older people living in and moving to the East Riding.

However, our System aspiration for our area remains strong with the East Riding Community Plan setting out our partnership ambition for communities that are healthy, thriving, prosperous and safe. The Health & Wellbeing Strategy (and its supporting strategies) expands on this, setting out a vision for:

An East Riding where all residents are supported to enjoy their maximum potential for health, wellbeing and participation, throughout their lives.

As a System, we have worked together to review our health and wellbeing priorities and have consulted key stakeholders as part of the Joint Strategic Needs Assessment (JSNA) for the East Riding. This recognised that whilst there have been significant improvements in health outcomes for our residents, there is always more we can do. Our response is to transform the ways we deliver quality services, as a single System and to increase levels of personal, community and system resilience. Prevention is at the centre of our approach. This Strategy is supported by the 5 year East Riding Wellbeing Health and Care Place Plan, which outlines how all System partner organisations will change the way they work in order to help deliver this strategy. We aim to enhance the wellbeing of the population of the East Riding and to transform the experience and care of people with ill health, including the consequences this has for their families, carers and friends. Our priorities are:

Children & Young People in the East Riding enjoy good health & wellbeing

Working age adults reduce their risk of ill health

East Riding residents achieve **healthy, independent ageing**

Health inequalities in the East Riding are reduced

We aim to achieve this by taking an asset-based approach, utilising the skills and knowledge of individuals, communities and organisations, rather than focusing specifically on problems or gaps. The approach aims to empower individuals, enabling them to rely less on public services and to be able to turn to their community for support in the first instance.

Our innovative work and commitment as a System means there is now a real opportunity to effectively bring together our complex mix of resources. An example of this is giving System partners the freedom to trial different approaches to meet particular local need, for example the Withernsea project, outlined later in this strategy.

We look forward to working with the strong and vibrant communities of the East Riding to help all our residents achieve the highest levels of health and wellbeing possible.

Cllr Jonathan Owen, Chair, Health & Wellbeing Board

Introduction: What we want to achieve

Good physical and mental health are fundamental elements to having a good quality of life. Many East Riding residents can expect to live a long and healthy life, but there are inequalities that mean others have a lower life expectancy and are more likely to spend a significant proportion of their life living with the impact of at least one long term health condition.

The System approach is to reduce this inequality through developing our relationship with our residents; providing opportunities for them to lead a healthy lifestyle, making the healthy way the easy way; reducing dependency, promoting prevention and the building of resilience of our residents, communities and the System. Our established voluntary and community sector continues to grow and will be a key partner in developing and delivering this approach.

Prevention has traditionally been seen as a role for public health specialists, but there is now widespread acceptance that prevention is the role and responsibility of all within the System, our communities and residents. Quite often for example, it is within more acute settings that we can prevent health and wellbeing deteriorating further and promote resilience, helping people to 'bounce back' as well as possible, as an integral part of their recovery.

Good physical and mental health is shaped by many factors, and those which are thought to have the most impact are commonly known as wider determinants of health, which include living and working conditions, income, housing, education/attainment, technology and access to food, water and sanitation, social and community networks and lifestyle factors. When these factors are not adequately met, they can have a significant detrimental impact, such as poor housing; Children living in poor or overcrowded conditions are more likely to have respiratory problems, to be at risk of infections, and have mental health problems. Conversely, effective provision related to these factors can be life and health enhancing, for example, technology can assist in remote monitoring of an individual's health and can reduce pressure on carers, visits to a clinic or a doctor, for example.

Through social prescribing, for example, we are working as a system to provide our residents with a range of opportunities to improve their health and wellbeing outside of traditional health care settings. Social prescribing aims to provide longer term benefits such as reducing dependence on services, helping to demonstrate to residents the importance of self-care and alternative approaches, utilising our community assets more effectively and building stronger communities.

For those residents who have ill health or are elderly, our focus is on maintaining quality of life and supporting independence. Outcomes and quality of life are higher for those who are able to remain in their own homes. For older people in particular, longer stays in hospital can lead to worse health outcomes and can increase their long-term care needs. Older people can quickly lose mobility and the ability to perform every day tasks, which leads to a loss of independence and an increased need for support.

We know that those with good general overall health and higher levels of resilience are more likely to recover from an incidence of ill health/planned treatment more quickly, reducing the length of their hospital or respite care stay.

Our vision recognises An East Riding where all residents are supported to enjoy their maximum potential for health, wellbeing and participation, throughout their lives.

Prevention

The NHS Five Year Forward View (October 2014) set out a strong case for prioritising prevention:

'If the nation fails to get serious about prevention, then recent progress in healthy life expectancies will stall, health inequalities will widen, and our ability to fund beneficial new treatments will be crowded-out by the need to spend billions of pounds on wholly avoidable illness.'

Less than 4 years after this warning, life expectancy in the UK has stopped improving for the first time since 1982 (when monitoring began).

Prevention is, therefore, at the heart of this strategy and the overall System approach. The strategy uses a model based on three levels of prevention:

Primary *(Action to be taken before a problem begins)*

Activities that **promote health and wellbeing** and **protect against exposure to risk factors** that lead to health and wellbeing problems. The focus will be on reducing or removing risk factors by **changing the environment** and the community, as well as, family and individual **life styles** and behaviours.

Secondary *(Action to be taken when problems have just begun)*

Activities that **stop or slow the deterioration of** health or wellbeing. This will involve finding things and intervening early and **targeting** those who are more susceptible because of environmental factors, lifestyle, health condition, family history, age, etc.

Tertiary *(Action to be taken after problems have happened)*

Activities directed at **managing and rehabilitating** those **living with** ill health conditions to reduce complications, **improving their quality of life** and extending their years of productivity.

Resilience

Resilience, simplistically defined, is having the ability to cope or adapt to difficulties. It is often referred to as the ability to bounce back from adversity, with those seen as having well developed resilience most likely to bounce back quicker and more fully. Consequently, developing resilience at personal, community and system level will help ensure that health and care services can be sustainable locally, promote health and well-being and prevent/reduce the impact of ill health where possible. Through using the resilience framework, our aim is for:

1. **Enhanced Personal Resilience within the East Riding:** *I will be able to keep myself well and cope with change*
2. **Enhanced Community Resilience within East Riding:** *We will keep each other well and support each other through change*
3. **Enhanced System Resilience across the East Riding and beyond:** *Our services will be able to look after us and support us through change*



To support the building of resilience, East Riding System partners want to see a system wide way of working that creates a more person-led approach to care and support. This is not a completely new approach in the East Riding. Fundamentally, this will involve all system partners coming together for the benefit of the individual, recognising the role they each play, not only in their respective professional roles, but also in identifying the wider needs of the person and making the necessary connections to system and other colleagues.

Why do we need to change?

Each year, Public Health England produce a health profile which provides a picture of people's health in East Riding of Yorkshire. It is designed to help the System to understand its community's needs, so that we can work together to improve people's health and reduce health inequalities.

Broadly in line with previous years, the 2018 profile showed that the health of people in the East Riding is generally better than the England average, as is life expectancy.

However, this masks a range of inequalities. Some areas, (especially in Bridlington, Goole and Withernsea), have some of the highest levels of poverty in England. These areas are characterised by low incomes, high unemployment, poor health, higher levels of crime and anti-social behaviour and low educational achievement.

Our residents live in towns which range from the wealthy, with good access to services and opportunities, to those living in relative poverty in remote areas.

We also recognise that there is a large gap between life expectancy and healthy life expectancy. This means a proportion of our residents live with preventable, multiple long term conditions for a large part of their lives. This strategy aims to increase the healthy life expectancy of residents and improve the quality of life of those with ill health. Traditional Healthcare services (i.e. those predominantly provided by the NHS) only account for 10-15% of the influence on health and wellbeing. The wider determinants of health, set out in the introduction, play a far greater role, including individual choices regarding health risk factors, such as smoking, vaccination uptake, diet and alcohol consumption.

Since the start of our last strategy, work to inform the Joint Strategic Needs Assessment has focussed on key issues such as parenting, unpaid carers, isolation and loneliness and mental and emotional health across all ages. The prevalence of multiple long term conditions affecting residents in East Riding means that we have a large number of unpaid carers who do an invaluable job of caring for others, often their loved ones.

As a result, the system has developed a number of delivery strategies supporting this Health & Wellbeing Strategy, such as the Mental Health & Dementia Strategy, Carers Strategy and Learning Disability Strategic Plan.

Prevention & Resilience factors throughout the Lifecourse

Through each part of our life course, there are life choices and wider environmental factors that can impact upon our future health and wellbeing. The following pages highlight some of the key prevention and resilience indicators at East Riding level; similar figures have been produced for our localities, which demonstrate the inequalities that can be masked by these overall figures. These factors have informed the development of this strategy and those which sit beneath.

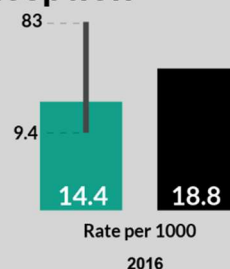
Start Well

Pregnancy and the Early Years

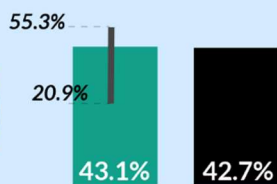


Prevention and **Resilience** within the first few years of life

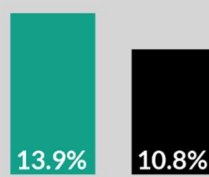
Under 18s Conception



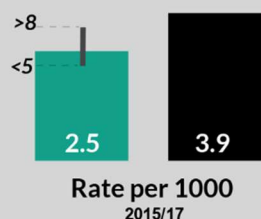
Breastfeeding (6-8 weeks)



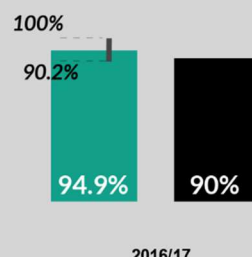
Smoking at Delivery



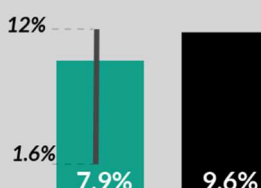
Infant Mortality (Under 1 year)



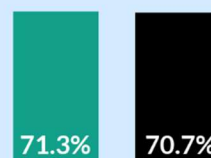
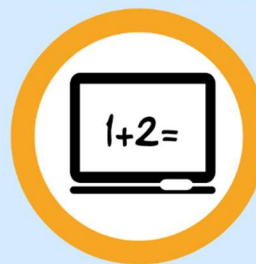
Vaccine Coverage - MMR



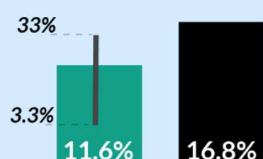
Obesity (4-5 years)



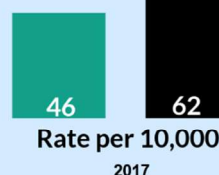
School Readiness - Reception



Under 16s Poverty



Children in Care



Key: Compared to England, East Riding is statistically: ○ Better ○ Similar ○ Worse

Prevention Indicator:

Resilience Indicator:

Indicator value for East Riding of Yorkshire:

Indicator value for England:

Bars show inequalities within ERY:

Inequalities derived from local data where possible.

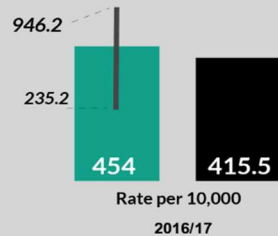
Develop Well

Childhood through to Adolescence

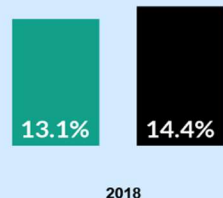


Prevention and **Resilience** throughout puberty, school and maturing

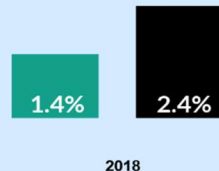
A&E Attendances (5-19 years)



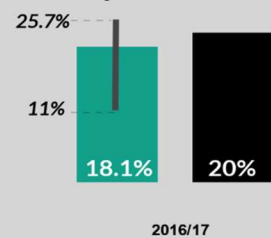
Pupils with Special Educational Needs (School Age)



Pupils with Social, Emotional and Mental Health Needs (School Age)



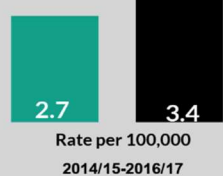
Obesity (10-11 years)



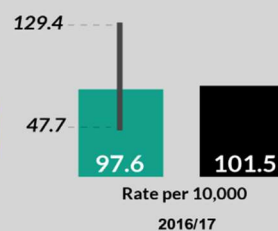
Homeless Young People (<16 years)



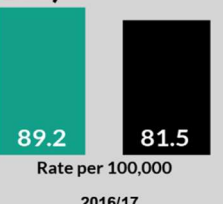
Alcohol-Related Hospital Admissions (Under 18s)



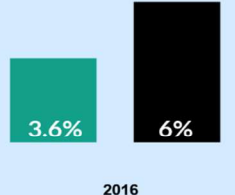
Admissions due to injury (0-14 years)



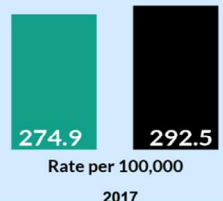
Mental Health Admissions (Under 18s)



NEET 16-17 year olds



First Time Entrants to the Youth Justice System (10-17 years)



Key: Compared to England, East Riding is statistically: ● Better ● Similar ● Worse

Prevention Indicator: Resilience Indicator:

Indicator value for East Riding of Yorkshire: Indicator value for England:

Bars show inequalities within ERY: Inequalities derived from local data where possible.

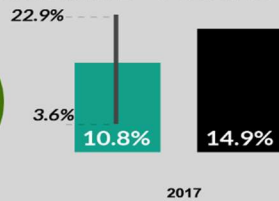
Live and Work Well

Adulthood and Working Life



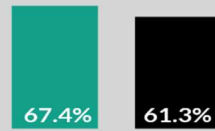
Prevention and **Resilience** throughout social, economic and health related life events

Smoking Prevalence - Adults



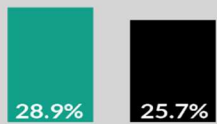
2017

Excess Weight in Adults



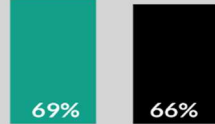
2016/17

Adults drinking over 14 units of alcohol a week



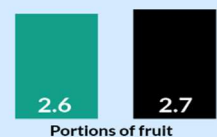
2011-14

Physically Active Adults



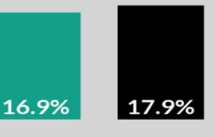
2016/17

Fruit and Vegetable Portions



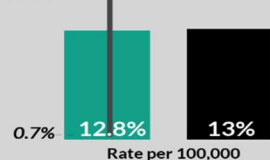
2016/17

Utilisation of outdoor space for exercise/activities



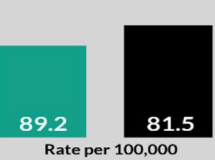
March 2015 - February 2016

Households not connected to the gas network



2016

Unemployment



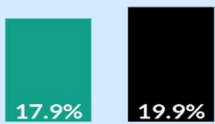
2016/17

Family Homelessness



2016/17

People with High Anxiety



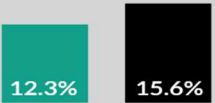
2016/17

Wellbeing Score



2016/17

Mental Health Prevalence



2014/15

Key: Compared to England, East Riding is statistically: ● Better ● Similar ● Worse ● Not compared

Prevention Indicator: Resilience Indicator:

Indicator value for East Riding of Yorkshire: Indicator value for England:

Bars show inequalities within ERY: Inequalities derived from local data where possible.

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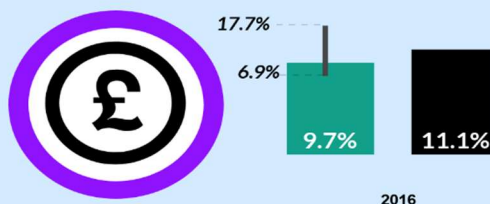
Age Well and End of Life

Retirement and Later Life



Prevention and **Resilience** for older adults, during changes in capabilities and end of life events.

Fuel Poverty



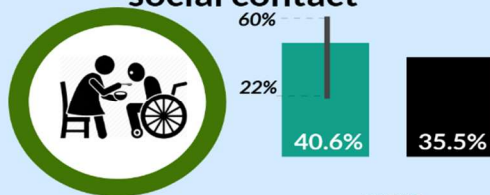
2016

NHS Health Check Eligibility (40-74 years)



2014/15-2018/19

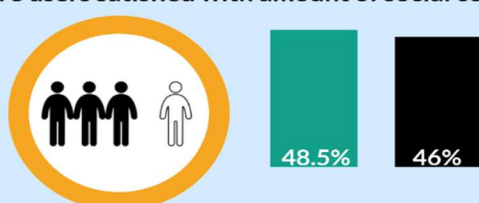
Carer - Satisfied with amount of social contact



2016/17

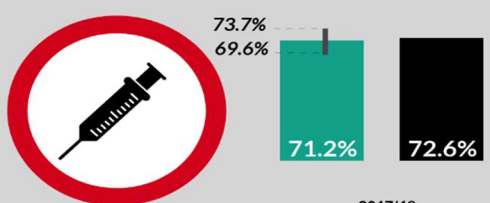
Social Isolation

Care users satisfied with amount of social contact



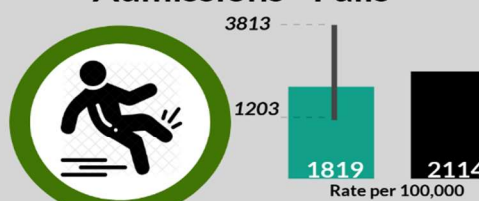
2017/18

Flu Vaccine Coverage



2017/18

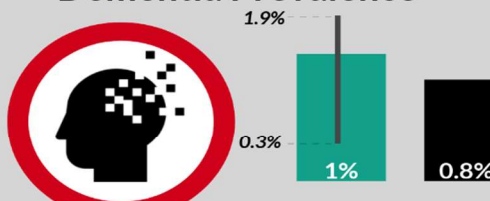
Admissions - Falls



Rate per 100,000

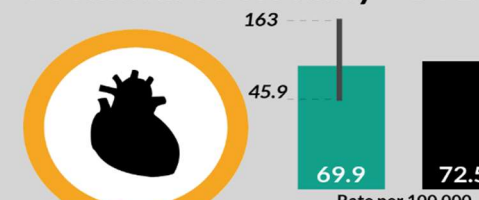
2016/17

Dementia Prevalence



2017/18

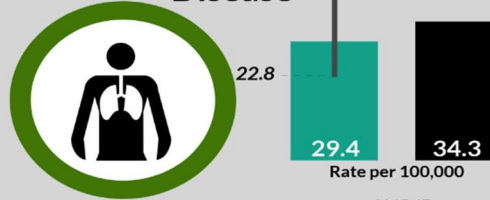
Premature Mortality - CVD



Rate per 100,000

2015-17

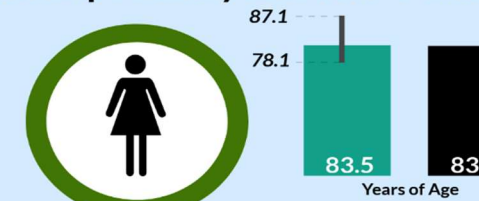
Premature Mortality - Respiratory Disease



Rate per 100,000

2015-17

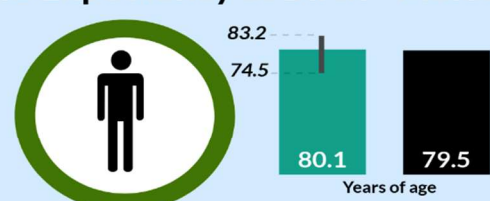
Life Expectancy at Birth - Females



Years of Age

2014-16

Life Expectancy at Birth - Males



Years of age

2014-16

Key: Compared to England, East Riding is statistically: ○ Better ○ Similar ○ Worse ○ Not compared

Prevention Indicator: Resilience Indicator:

Indicator value for East Riding of Yorkshire: Indicator value for England:

Bars show inequalities within ERY: Inequalities derived from local data where possible.

The Health & Wellbeing Strategy 2019-22 on a page

Our vision is for an East Riding where all residents enjoy their maximum potential for health, wellbeing and participation, throughout their lives

Priority outcomes	Stages of the life course and key events	How Prevention is Embedded	How resilience is increased
1. Children and young people in the East Riding enjoy good health and wellbeing	Start Well (<i>Pregnancy & the Early Years</i>) Includes beginning childcare, the start of pre-school/nursery and primary school	<ul style="list-style-type: none"> • Reduce smoking in pregnancy • Increase protection against a range of serious and potentially fatal diseases through increased vaccine take up 	<ul style="list-style-type: none"> • Promote Breast Feeding • Improve school readiness • Improve the timeliness of autism assessments and associated service provision Deliver the SEND Strategy
	Develop Well (<i>Childhood through to Adolescence</i>) Includes puberty; secondary school; entering or leaving care; starting work or being unemployed; negotiating relationships; driving; drinking alcohol and using drugs; starting further or higher education; leaving home and homelessness.	<ul style="list-style-type: none"> • Encourage and support adopting healthy behaviours with a particular focus on reducing childhood obesity and alcohol & drug? misuse 	<ul style="list-style-type: none"> • Improve adolescent mental health through the 'Futures in Mind' Plan (CAMHS) to transform young people's mental health services • Raise the attainment of disadvantaged pupils
2. Working age adults reduce their risk of ill health	Live & Work Well (<i>Adulthood & Working Life</i>) Includes establishing or ending intimate relationships; the birth of children; changes in housing, employment, income and physical and mental capacity; homelessness and the death of parents, family members or partners.	<ul style="list-style-type: none"> • Increase take up of Health checks for those age 40-74 • Provide support to maintain healthy behaviours through adulthood with a particular focus on exercise, healthy eating and alcohol Reduce dependence on prescription drugs 	<ul style="list-style-type: none"> • Sustainable and easy to use services for people to access • Equipping people with the skills they need to progress in the labour market,
3. East Riding residents achieve healthy, independent ageing	Age Well & End of Life (<i>Retirement & Later Life</i>) Includes changes in employment, grandparent or carer role, ceasing driving, deteriorating mental or physical health, death of close family/friends, changes in housing circumstances and entering a residential or nursing care setting.	<ul style="list-style-type: none"> • Support creation of 'active communities' to help reduce, prevent and delay the need for services and improve healthy happy years of life. 	<ul style="list-style-type: none"> • Reducing social isolation, particularly for those groups identified as most vulnerable, particularly as they age, including carers, veterans, the disabled and lesbian, gay, bisexual & transgender (LGBT).
4. Health inequalities in the East Riding are reduced	Across the life course Includes wider determinants of health such as living and working conditions, income, housing, education, social and community networks and lifestyle factors.	<ul style="list-style-type: none"> • Develop a 'place-based' approach to meet the housing, infrastructure, employment and local service needs to create sustainable and growing communities. 	<ul style="list-style-type: none"> • Engage those furthest from employment or education and deliver higher level skills • Building strong and effective community networks • Provide ease of access to healthy lifestyle choices.

How are we going to change? Our Approach to Managing a 'Complex Adaptive System'

Through this strategy, we are taking a 'what's strong' rather than a 'what's wrong' personalised approach, adopting a positive starting point that utilises system assets at a local level. In essence, we are creating permissive space and freedom for the System to identify and develop individualised solutions to improve the wellbeing of the population. To do this in specific localities where issues have been identified will mean utilising the many tools already available to system partners, in order to offer the prospect of making a real difference to the residents of the East Riding. This will no doubt be combined with new approaches and will change and adapt to need.

Set out below are a range of these tools and approaches currently being used in various settings in the East Riding, and others which are being considered. These are not exhaustive, but here to support and stimulate thinking and action to improve health and wellbeing in an environment that requires a complex adaptive system approach to drive real progress.

We believe we have a great story to tell here in the East Riding about our leading edge work which is transforming Health and Social Care and the wider determinants of health and by supporting our East Riding population to be self-supporting with intervention only where appropriate. We are exploiting new opportunities and working differently in our Place Based Bridlington Project led by the Police and our Withernsea Project led by the CCG coupled with our Sport England pilot led by the Council.

Our collective workforce is a major asset, and through the Systems' programmes of work, staff will be encouraged to mirror the behaviours set out in this strategy, promoting prevention and resilience within their services and to their colleagues.

Key tools and projects include:

- Primary Care Networks
- Social Prescribing
- Asset Based Community Development
- Making Every Contact Count
- Behaviour Change and 'Nudge'
- Demand Mapping and Population Health Management Intelligence
- Commissioning
- Exploiting Technology
- Bridlington Early Intervention Project
- Withernsea Whole System Project

Performance & Governance

The Health and Wellbeing Board will oversee the delivery of this strategy and will monitor progress on a regular basis.

This will require the Board to support and challenge all system partners to align their work to the strategic direction set out in the strategy and to show how their organisations will contribute towards increasing resilience, a greater focus on prevention and measure what difference is being made to the lives of people living in the East Riding. It will, in particular, hold the Place partnership to account for delivery of the outcomes.

It will also involve support and challenge against the range of strategies and plans which sit below this strategy, which are listed below. The East Riding Place Plan in particular provides further detail on our approach and how we will monitor progress against our priority outcomes. This Plan seeks to deliver **three main priorities**:

1. Development of locality based Primary Care Networks; integrating services around communities in partnership with individuals;
2. Developing and delivering services across the East Riding by providing greater system work and outcomes and particularly deepening existing commissioning partnerships and;
3. To continue to develop sustainable services through enablers such as digital, workforce, communications and estates. All of these will support delivery of new services models leading to achievement of our stated outcomes for the people of the East Riding.

The Board will work through the Place Partnership and action-focused task groups to take forward the initiatives for tackling specific issues outlined in this Strategy.

The Board will regularly receive reports, updates and case studies from system partners and from relevant projects and sub groups, and a performance update will be considered at every meeting. With increasingly limited resources, the Board will closely monitor performance and service pressures, and work to identify solutions whenever appropriate.

As an example of this, the Place Partnership is developing a performance dashboard for performance management, focusing on population health management and this will be used to help monitor progress against the priority outcomes set out in this Strategy.

How we will deliver?

Our Priorities	Children & Young People in the East Riding enjoy good health & wellbeing	Working age adults reduce their risk of ill health	East Riding residents achieve healthy, independent ageing	Health inequalities in the East Riding are reduced
Cross cutting	Increased resilience Prevention is embedded			
Governance	Health & Wellbeing Board	Place Partnership	Sustainable Transformation Plan and emerging Integrated Care System approach	
	Joint Strategic Needs Assessment	Business Intelligence		
	Health Impact Assessments	Joint Commissioning	Effective Performance Reporting	
	Integrated Better Care Fund			
Current key programmes & Projects	Sport England Local Delivery Pilot (Withernsea)	Social Prescribing	Asset Based Community Development	Making Every Contact Count
Delivery through	Skilled and motivated System workforce	East Riding Place Based Plan and System strategies	Key programmes, i.e. Withernsea project	Locality Plans
Wider Influencing Factors	Housing	Economic Prosperity	Education	Rurality and Transport
	Sport, Play & Arts	Safety	Community	Public Health Strategy
Performance Measures	Population indicators monitored and reported through Inphase performance management software			

Progress towards achieving the overall outcomes set out in the table on page 11, will be reviewed by the Health and Wellbeing Board on a regular basis.

Our System Strategies

The 11 organisations across the East Riding System have agreed that strategic documents should be developed and adopted as a System rather than be owned exclusively by one or two organisations. The System has identified and agreed the key strategies to which this applies, and these are the delivery mechanism of this strategy.

The Adult Mental Health and Dementia system strategy (2018-23) was the first of this kind for the East Riding to be developed and was approved by the System. As each of the strategies listed below are due for refresh, the System will work together to develop successor strategies which aim to deliver the key principles of this strategy, and which will in particular, have prevention and resilience as their key themes.

System Strategy	Key Content	Refresh
Adults Strategy	Describes our vision for Adult Social Care and Support and how we will meet the challenge of our changing population	2018
Adults, Children & Young People with Autism Strategy	Our aspiration for this group of people and their carers, is for them to enjoy a good quality of life.	2019
Adult Carer's Strategy	Our key outcomes, actions and measures to ensure carers have the ongoing support necessary to enable them to find and maintain the right caring/healthy life balance	2018
Alcohol Strategy	Describes the opportunities for reducing harm caused by alcohol among local people and visitors.	2019
Children and Young People's Strategic Plan	Developed and lead by the Children's Trust Board, this key partnership document sets out ambitions relating to children and young people, and also has a suite of supporting strategies on specific topics and themes such as Children Looked After and Special Educational Needs and Disabilities.	2020
Drugs Strategy	New in development	2020
General Practice Strategy	Will describe how the CCG will support the sustainability of General Practice by aligning with the General Practice Forward View GPFV, to enable General Practice to be local leaders in the development and delivery of local plans.	2019/20
Healthy Weight Strategy	Describes the ambition to help people achieve a healthy weight, preventing obesity and other conditions.	2021
Infant Feeding Strategy	Seeks to deliver increased rates of breastfeeding from birth, and ensure information and support is available to assist parents	2020
Learning Disability Strategy	Our key actions and measures to ensure people with a learning disability are supported to enjoy as fulfilling lives as possible with good health and wellbeing	2019/20
Mental Health & Dementia Strategy	Describes the ambition to support people with mental ill health and dementia through key themes - wellbeing and good mental health, early intervention, access to and integration of services	2021
Urgent Care Strategy	Describes how the CCG will work with partners to re-model the way in which urgent care is delivered, in line with national policy	2021

Delivery of these strategies and the East Riding Place Plan are fundamental to our new approach, where we will truly operate as a system. This approach is not without risk, but is a unique opportunity to make a real and lasting positive impact on the lives of all of our residents, which System partners have embraced. As a Health & Wellbeing Board we look forward to monitoring progress over the course of the strategy and taking actions to ensure our residents and communities are able to participate in the journey in making a real difference.