## Wiltshire Joint Local Health and Wellbeing Strategy

2023-2032

#### **Foreword**

The health and wellbeing of the people of Wiltshire is the highest priority for the Wiltshire Health and Wellbeing Board. We are determined to ensure that "people in Wiltshire are empowered to live full, healthy and enriched lives."

This strategy has been developed based upon the evidence of need and has enabled the board to focus on four thematic areas where it can have its most impact, ensuring everyone has access to the opportunities and services that we would expect for our own friends and families. We know that our population is ageing (there is a forecast increase of 87% in our 85 and over population by 2040). We also know that where someone is born and raised in Wiltshire can have a significant influence on how healthy they are and how long they will live and that, sadly, the pandemic has further exacerbated these health inequalities. We want to ensure everyone can thrive in Wiltshire. Achieving this will mean a clear focus on reducing inequalities but also connecting with communities to encourage local action and better tailoring the delivery of our services to reflect the needs of local areas.

As organisations responsible for designing, commissioning and delivering a huge range of health and social care services for Wiltshire residents, we are keen to make services the best they can be and excellent value. Integrated working is an essential part of this. We also recognise the need to shift the focus from acute to primary and community care and, in turn, to preventative activity and population health. A population health approach will allow the risks and rewards of investment in services to be shared locally and the potential to try new approaches such as clustering more care services around GPs or commissioning on the basis of whole population health outcomes rather than systems which reward increased contact. It will also mean we fully recognise the difference good jobs, housing, natural environments, education and community can make to health and wellbeing.

We must target our collective resources where the evidence tells us action will make the greatest improvements to people's health and wellbeing. Therefore, our four guiding themes for this strategy build on those of our previous strategy (and those reflected in Wiltshire Council's Business Plan) as a clear long term commitment to this way of working. They are:

- 1. Improving social mobility and tackling inequalities
- 2. Prevention and early intervention
- 3. Localisation and connecting with communities
- 4. Integration and working together

As a board we will continue to work closely together to deliver the vision of this strategy so that our ambition is realised.

### **Cllr Richard Clewer**

Chair, Wiltshire Health and Wellbeing Board

## **Organisational logos**

Bath and North East Somerset, Swindon and Wiltshire Integrated Care System, Wiltshire Council, Healthwatch Wiltshire, NHS England, Wiltshire Police and Crime Commissioner, Wiltshire Police, Wiltshire Local Medical Committee, SW Ambulance Service Trust, Avon and Wiltshire Mental Health Partnership, Oxford Health Trust, Wiltshire Health and Care, HCRG, Royal United Hospital, Salisbury Foundation Trust, Great Western Hospital, DWFRS, VCS voice

#### Introduction

Wiltshire Health and Wellbeing Board (HWB) was introduced by the Health and Social Care Act 2012. It is a partnership that brings together the leaders of the health and social care system. The board is required by legislation to deliver specific responsibilities:

- Produce a Joint Strategic Needs Assessment (JSNA) and Pharmaceutical Needs Assessment
- Develop a Joint Local Health and Wellbeing Strategy
- Encourage and enable integrated working between health and social care

The JSNA uses current data and evidence about health and wellbeing in Wiltshire, to highlight the health needs of the whole community. It demonstrates how needs may vary for different age groups, as well as identifying health differences for disadvantaged or vulnerable groups. The JSNA looks at a wide range of factors that help shape and influence the health and wellbeing of individuals, families and local communities such as education, employment, housing, transport and the environment.

www.wiltshireintelligence.org.uk

Within this document health is understood to be a dynamic state of complete physical, mental, spiritual and social well-being and not merely the absence of disease or infirmity.

This Health and Wellbeing Strategy is a shared strategy, which aims to improve the health and wellbeing of the local population. It uses the analysis and data from the JSNA, to help identify and agree the key ambitions for our population which as a Health and Wellbeing Board we will work together to deliver.

It does not list everything that all organisations will be doing to improve health and wellbeing. Instead it focuses on where Wiltshire's Health and Wellbeing Board can add value and sets out our vision for integrated working for the future.

The purpose of the strategy is to enable:

- All health and wellbeing partners to be clear about our agreed priorities
- All members of the HWB to embed the priorities within their own organisations and ensure they are reflected in a joined-up way in their commissioning and delivery plans (this is a statutory duty for the council and the NHS)
- The board to hold organisations to account for their actions towards achieving the objectives and priorities in the strategy

Wiltshire's strategy has been developed in tandem with the new Integrated Care Strategy (the 'system level' strategy) for Bath and North East Somerset, Swindon and Wiltshire (BSW) and the first five-year Joint Forward Plan for the Integrated Care Board which will deliver it. The two strategies are complementary and differentiate the activity that will be taking place at 'system' (ie BSW) and 'place' (ie Wiltshire) levels. To ensure alignment Wiltshire's Health and Wellbeing Board is consulted on the system level strategies and related delivery plans and has the opportunity to include a statement on compliance with the JSNA and JLHWS within that document, as well as to be consulted on the annual report for BSW.

Wiltshire's Health and Wellbeing Board will consider regular progress reports on the delivery of this strategy, which will inform the wrok programme of the Wiltshire Integrated Care Alliance and the individual work of members of the board. The progress reports will also inform the timescale for any refresh of this strategy before 2032.

## Overview of Wiltshire population

Wiltshire's <u>Joint Strategic Needs Assessment</u> provides an in-depth analysis of the needs of the population of Wiltshire. Below is an overview of population and deprivation:

## Wiltshire's current population:

- 510,400
- 51% female and 49% male

### By 2040 in Wiltshire:

- Under 65+ population expected to have decreased by 3%
- 65+ population expected to have increased by 43%
- 85+ population expected to have increased by 87% (from 15,200 to 28,438)

## Areas of deprivation:

There are 8 of the 285 small areas of geography (LSOAS) in Wiltshire that are within the 20% nationally most deprived. They are classified as "urban city and town", and found in **Trowbridge, Chippenham**, **Melksham and Salisbury.** Households in Wiltshire in the most deprived areas experience higher levels of fuel poverty (17% of households compared with 7% in the least deprived areas).

**Health inequalities** are understood to be avoidable, unfair and systemic differences in health between different groups of people. There are many groups experiencing health inequalities including those from ethnic minority communities, those experiencing homelessness, those with a learning disability and those living in rural areas. It is useful to keep this in mind when reading through the JSNA.

The health of those in Wiltshire is generally very good compared to the national average. On the whole people in Wiltshire have a higher life expectancy and healthy life expectancy than the England average. Fewer people are living in areas of deprivation, smaller proportions are living unhealthy lifestyles, more people have been vaccinated and crime and unemployment rates are very low. However, evidence from the Joint Strategic Needs Assessment has highlighted that the most deprived 20% of areas within Wiltshire have repeatedly poorer outcomes than the least deprived 20%.

Our communities living in those least deprived areas of the county, will enjoy a greater array of life chances and more opportunities to lead a flourishing life. They also have better health. The two are linked: the more favoured people are, socially and economically, the better their health. Inequalities within Wiltshire, and the need to maintain a focus on major health issues, for example reducing deaths from cancer and cardiovascular disease, mean that local services should always be accessible to all. Inequalities do exist in Wiltshire and, with an ageing population structure health needs are due to change further over future years. This, combined with the reduction in the working age population means that the current approaches to health and care will not be sustainable in the future and could have an impact on all aspects of our lives if good health is not prioritised. Therefore, we must narrow the gap in health and wellbeing outcomes. We have to make sure everyone has the opportunity to have an excellent education, to learn skills and get a good job, to live in a nice environment and live healthier lifestyles into old age.

#### Vision

"People in Wiltshire are empowered to live full, healthy and enriched lives"

## **Key Themes of Wiltshire's Health and Wellbeing Strategy**

## 1. Improving social mobility and tackling inequalities

In everything we do, we consider the impact of the action on social mobility and ask how we can help to tackle the disparities in opportunities, experience, access and health outcomes that exist within Wiltshire. We focus on the factors that have the greatest influence on people's health, such as ensuring good and secure homes and jobs.

## 2. Prevention and early intervention

We take a long-term view, focusing on what is right for Wiltshire and invest in prevention and early intervention to tackle problems before they get worse. We encourage personal responsibility and have a whole life approach to planning and providing services for our residents alongside this, aimed at improving outcomes in population health and care.

## 3. Localisation and connecting with communities

We ensure our dialogue with communities is open, transparent and inclusive, in the right place and at the right time so that the distinctive needs of local communities are met. We enable stronger and resilient communities and support broader social and economic development

## 4. Working together and integration

We design and deliver our activities in partnership with service users, local communities and public sector partners. We collectively consider how to integrate our work, get maximum value for public sector spend and plan our use of the public sector estate together.

## Theme 1: Improving social mobility and tackling inequalities

In everything we do, we consider the impact of the action on social mobility and ask how we can help to tackle the disparities in opportunities, experience, access and health outcomes that exist within Wiltshire. We focus on the factors that have the greatest influence on people's health, such as ensuring good and secure homes and jobs.

## Case for change

Whilst a significant proportion of our population are healthy; good health isn't just about the treatment of illness. It is the food we eat, the relationships we maintain, the environments in which we live and work and the opportunities we have to thrive. Supporting people to remain healthy, independent and well is a crucial feature of this strategy. To make the biggest changes in people's health and wellbeing, we need to focus on the social and environmental factors impacting on people's lives. Addressing these wider determinants of health - such as housing, unemployment, homelessness, education, social isolation, transport and community safety - is critical for improving social mobility and tackling inequalities.

## Achieving change

We will:

- Promote health in all policies including housing, employment and planning. This will include the development of sustainable communities, whole life housing and walkable neighbourhoods. The review of Wiltshire's Local Plan and Local Transport Plan is an important opportunity to deliver this.
- Support healthy home settings with action on fuel poverty, helping people to find work, mental health and loneliness and by increasing digital inclusion
- Give children the best start in life with a focus on the whole family, family learning, parenting advice, relationship support, the first 1000 days/ early years and community health services
- Target outreach activity identifying particular groups to improve health outcomes and access to services (identifying and then focusing on several of these each year) - work to tackle root causes, plan delivery and carry out evaluation.
- Improve access through online services, community locations and mobile services as well as community diagnostic hubs.

#### 1. The Home Setting

The 'home' plays a key role in enabling people to achieve good health and wellbeing.



- Improved physical health, as well as better mental health and well being
- Better social interactions and inclusions
- Better access to services and opportunities

#### 2. Early Identification and Prevention

Focus on children, working across 'whole' family interventions



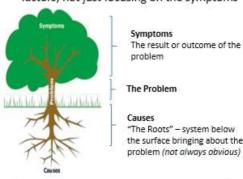
Lifecourse

Diverting people from statutory or formal services through local, flexible, community solutions

- Reducing long-term health effects from exposures of direct/in-direct harms on young people
- Increasing resilience of our whole population
- Reducing social isolation and loneliness
- · Improved health and wellbeing

## 3. Tackling Root Causes

Tackling root-causes and addressing causal factors; not just focusing on the symptoms



- Reduce risk of frequent and multiple contacts to services/agencies
- Reduced victimisation
- Improved health and wellbeing realised earlier

## Theme 2: Prevention and early intervention

We take a long-term view, focusing on what is right for Wiltshire and invest in prevention and early intervention to tackle problems before they get worse. We encourage personal responsibility and have a whole life approach to planning and providing services for our residents alongside this, aimed at improving outcomes in population health and care.

## **Case for change**

Evidence suggests 60% of what we do to prevent poor health and improve wellbeing relates to social determinants of health i.e. the conditions in which people are born, grow, live, work and age. Unhealthy behaviours for example smoking, alcohol misuse, poor diet and lack of physical activity, are significant contributors to a large proportion of ill health and long-term health conditions such as cancers, cardiovascular disease, diabetes and dementia. We need a system that is fit for purpose, can manage the challenges of increasing demand, focuses on prevention, supports those with long-term conditions and their carers and helps our populations to improve their health outcomes.

## **Achieving change**

We will:

- Lay the foundations for good emotional wellbeing whilst young by developing a coordinated approach and promoting a core offer in schools across Wiltshire relevant to the challenges young people face (including new challenges such as social media)
- Encourage personal responsibility across the life course in all schools, with working age adults and for the elderly focusing on healthy lifestyles, smoking cessation, alcohol and substance misuse
- Prevent ill health through increased uptake of screening, health checks and immunisations as well as ensuring the best use of antibiotics.
- Enable a healthy workforce through targeted preventative activity
- Adopt a proactive population health management approach rolling this out to new areas (such as management of moderate frailty) each year to enable earlier detection and intervention

## Theme 3: Localisation and connecting with communities

We ensure our dialogue with communities is open, transparent and inclusive, in the right place and at the right time so that the distinctive needs of local communities are met. We enable stronger and resilient communities and support broader social and economic development

## **Case for change**

Population growth and management of long term conditions means our health and care system is under increasing pressure, particularly as it recovers from the pandemic. When people have the skills, knowledge and confidence to manage their own health and care, not only do they achieve better health outcomes, there is also the benefit of reduced healthcare costs and increased satisfaction with services. However, when individuals in a community feel isolated, this impacts their ability to remain resilient, which is a strong predictor for poor outcomes. Enabling communities to be stronger and more resilient allows local solutions for local problems, by working together with partner agencies and the voluntary sector to meet their health and wellbeing needs.

## **Achieving change**

We will:

- Support local community action through initiatives such as neighbourhood collaboratives allied to the development of Primary Care Networks, the community mental health model, area board activity using community area JSNAs to inform local action planning and the allocation and bidding for wellbeing grants
- Pilot community conversations starting with neighbourhoods in Wiltshire that have significant deprivation and roll these out gradually across the county.
- Consider the way in which we buy goods and services can deliver improved local job opportunities (acting as 'anchor' institutions) and other wider benefits (social value)
- Embed Healthwatch Wiltshire and voluntary and community sector voices in relevant decision-making structures and ensure the public voice is heard with consultation results and co-production reflected in decision papers and relevant attendance at the Health and Wellbeing Board.

## Theme 4: Working together and integration

We design and deliver our activities in partnership with service users, local communities and public sector partners. We collectively consider how to integrate our work, get maximum value for public sector spend and plan our use of the public sector estate together.

## Case for change

Our current health and care system is under pressure and can be confusing for patients, families and carers. As our populations get older and more people develop long-term health conditions, our system is becoming less able to cope with the changing needs and expectations of the people it serves. This is leading to higher demand for social care, carers and community health services and these pressures will continue to increase with a reduction in the working age population. The way we pay for health and care services can encourage high end care in expensive settings, often reinforcing isolated working practices. We currently spend too much on services responding at the point of crisis and not enough on early intervention and preventative support that aims to keep people well for longer. Initial signs are that covid has reinforced the investment in acute services and although there has been some staffing growth there are also challenges with increasing activity and productivity across the system to address the elective care backlog.

## Achieving change

We will:

- Provide integrated, personalised services at key stages in a person's life this will include starting to complete later life planning with people in their early 60s (or before that in more deprived areas) so that we are preparing for when they are older, end of life care, and increasing the provision of personal budgets
- Boost 'out-of-hospital' care, encouraging a 'hospital without walls' model with improved digital and local access to consultants, and dissolving the divide between primary and community health services - through coordination of community multi-disciplinary teams, clustering services around primary care networks, and guaranteeing support to people in care homes
- Enable frontline staff to work more closely together – planning our workforce needs together, developing case studies on front line cooperation, supporting shared records and IT and sharing estates wherever possible
- Ensure carers benefit from greater recognition and support by improving how we identify unpaid carers



- Improve join-up of services through community healthcare, primary, secondary and tertiary healthcare (including specialist services, armed forces and their families, pharmaceutical services and healthcare in the justice sector)
- Drive improvement by delivering our vision through collective oversight of quality and performance, reconfiguration of clinical pathways, recommissioning of services and overseeing pooled budgets and joint teams together (through the Wiltshire Integrated Care Alliance). The ICA will bring together officers from the relevant organisations and report regularly to the Health and Wellbeing Board on progress against this plan and its own transformation programme as well as the Better Care Plan.

## Summary

Theme	Improving social	Prevention and	Localisation and	Integration and working
	mobility and	early intervention	connecting with	together
	tackling inequalities		communities	
Actions	Promote health in all	Lay the foundations	Support local	Provide integrated services
to	policies – including	for good emotional	community action –	at key stages in a person's
achieve	housing,	wellbeing whilst	through initiatives	life – including later life
change	employment and	young – by	such as	planning, end of life care,
	planning. This will	developing a	neighbourhood	and increasing the provision
	include the	coordinated	collaboratives allied	of personal budgets
	development of	approach and	to the development	
	sustainable	promoting a core	of Primary Care	Boost 'out-of-hospital' care,
	communities, whole	offer in schools	Networks, the	dissolving the divide
	life housing and	across Wiltshire	community mental	between primary and
	walkable		health model, area	community health services -
	neighbourhoods.	Encourage personal responsibility across	board activity using community area	through community multi- disciplinary teams,
	Support healthy	the life course – in	JSNAs to inform	clustering services around
	home settings – with	all schools, with	local action planning	primary care networks, and
	action on fuel	working age adults	and the allocation	guaranteeing support to
	poverty,	and for the elderly –	and bidding for	people in care homes
	worklessness,	focusing on healthy	wellbeing grants	
	mental health and	lifestyles, smoking		Enable frontline staff to
	loneliness and by	cessation, alcohol	Pilot community	work more closely together
	increasing digital	and substance	conversations –	<ul> <li>planning our workforce</li> </ul>
	inclusion	misuse	starting with	needs together, developing
			neighbourhoods in	case studies on front line
	Give children the	Prevent ill health -	Wiltshire that have	cooperation, supporting
	best start in life –	through increased	significant	shared records and IT and
	with a focus on the	uptake of screening,	deprivation and roll	sharing estates wherever
	whole family, family	health checks and	these out gradually	possible
	learning, parenting	immunisations as	across the county.	
	advice, relationship	well as tackling		Ensure carers benefit from
	support, the first	antimicrobial	Consider the role	greater recognition and
	1000 days/ early	resistance through	that procurement	support by improving how
	years and	optimising the use	can play in	we identify unpaid carers
	community health	of antibiotics	delivering social	
	services		value and the way in	Improve join-up of services
		Adopt a proactive	which organisations	including specialised
	Target outreach	population health	can act as anchor	commissioning
	activity – identifying	approach – rolling	institutions	
	particular groups to	this out to new		Drive improvement through
	improve access to	areas (such as	Embed Healthwatch	collective oversight of
	services and health	moderate frailty)	Wiltshire and VCS	quality and performance,
	outcomes and tackle	each year to enable	voices in relevant	reconfigurations and
	root causes	earlier detection	decision-making	recommissioning;
		and intervention	structures; ensure	overseeing pooled budgets
	Improve access		the results of	and joint teams together –
	through online		consultation are	including the ICA
	services and		reflected in decision	transformation programme
	community locations		papers	and Better Care Plan

# Health and wellbeing: strategic links

Youth Justice Plan

FACT Partnership Strategy Looked

After Children Strategy SEND

Support Strategy Transitions Plan

Early Help

Mental Health and Wellbeing

Children and Young People's Plan

Positive leisure time activities

Local Skills Improvement Plan

Children's services

Local Plan and Local Transport Plan (LTP)

UK Shared Prosperity Fund Investment Plan and economic development activity

Wiltshire Climate Change Strategy and Delivery Plan. NHS Sustainability Strategy

Wiltshire Playing Pitch Strategy Park and Open Spaces

Blue and Green

Infrastructure

Air Quality Strategy Licensing Policy

Environment

Voluntary and Community Sector

Voluntary and community sector Procurement Strategy

Digital Strategy

Finance and corporate services

Living and working conditions

Work environment

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Joint NHS and Council:

Integrated Care Strategy and Delivery Plan Better Care Fund Plan Inequalities Strategy

## Health and care

BSW Care Model

Suicide prevention

End of Life Care

Mental Health and Wellbeing

Autism Strategy Annual Public

Health Report

Wiltshire Community Safety Partnership Strategy Domestic

Abuse and Sexual Violence Strategy Housing Strategy

Homelessness Strategy

Sexual Health and Blood Borne Viruses Strategy Obesity

Strategy

Dementia Strategy

Carers' Strategy

Leisure and Physical Activities, Libraries and Culture

Adult and community services

Wider determinants of health and wellbeing