



Our Better Health
and Wellbeing Strategy
2017 - 21

South Tyneside Partnership

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Foreword

We are pleased to introduce the Joint Health and Wellbeing Strategy for South Tyneside (2017-21).

This document updates the strategic priorities of our previous Joint Health and Wellbeing Strategy (2013-16) and provides an overarching framework for our Health and Wellbeing Board to agree commissioning plans for the NHS, social care, public health and other services.

South Tyneside has a host of assets that can be brought to bear to improve health and reduce inequalities. We want to build on our existing strengths - for example our green spaces, sport and leisure facilities, community associations, third sector and membership organisations, so that for our residents, healthy choices will become easy choices.

There has been a lot of important work carried out in South Tyneside and across the region in the last few years to improve the health of the population. The North East has seen the fastest increase in life expectancy in England in recent years. But the health and wellbeing gap compared to other parts of the country remains stubbornly high, and some important collective steps have been taken to address that gap.

The Health and Wellbeing Commission of the North East Combined Authority has concluded that a cycle of missed opportunities have contributed to poor health, over-dependence on hospital services and reduced economic growth. Their report signalled a big shift in emphasis and resources towards prevention of ill health. This includes supporting mental wellbeing to keep people in work.

We recognise that the health and social care system is in an extremely difficult position with regards to funding but that health, wellbeing and access to high quality services must remain a top priority for all partners. We are therefore working together as a local health economy to prioritise the resources we do have and make the best use of the South Tyneside pound in an effort to ensure that by 2021 health inequalities will have reduced to be comparable with the rest of the country, there will be thriving community services and high quality, seven days a week, hospital and specialist services. We will also continue to challenge national government to ensure that South Tyneside gets the resources it needs to improve health and social care services.

The starting point for updating the health and wellbeing strategy was a widespread and detailed consultation with a range of local stakeholders. It aims builds on previous successes, for example delivering some of the best smoking cessation outcomes in the country, in maintaining very high rates up uptake in childhood immunisations, improving wellbeing by addressing the wider determinants of health.

The strategy focusses on the outcomes that we want to achieve. It identifies how we will know that we are making progress towards those achievements and sets out the priority areas of work that will contribute to that progress.

Some of the key health issues we face include an ageing population requiring more health and social care, high rates of smoking in pregnancy, excess weight in children and adults and high rates of childhood injuries.

We are confident that by working in partnership to address these issues we will make South Tyneside a healthier and more equitable place to live, invest and bring up families.



Cllr Iain Malcolm
Chair of the Health and Wellbeing Board



Dr Matthew Walmsley
Vice-Chair, South Tyneside Health and Wellbeing Board

Introduction

Our Better Health and Wellbeing Strategy is the **go-to** plan for how we are tackling the big health and wellbeing issues in South Tyneside. A joint health and wellbeing strategy is a mandatory requirement for a local area; it should be clear in its ambition, and focussed on the big issues in the population that can only be tackled through collective action and a willingness to continuously improve health and wellbeing - Our Better Health and Wellbeing Strategy sets this out for South Tyneside.

The South Tyneside Health and Wellbeing Board developed and published a health and wellbeing strategy in 2013. South Tyneside was a forerunner on Health and Wellbeing Board development, as one of the first local authorities in the country to establish a Shadow Health and Wellbeing Board. Commitment to the South Tyneside Health and Wellbeing Board has remained strong since its inception with strong senior buy-in by all key organisations - a critical success factor as flagged by the Kings Fund.

Three years on, the South Tyneside HWBB agreed to take stock of progress and refresh the agreed outcomes, activities, governance arrangements, and performance structure of the Strategy.

There have been some key health and wellbeing successes in South Tyneside with life expectancy continuing to increase, adult smoking prevalence declining rapidly, continued good uptake of immunisation and screening programmes, and the development of integrated care services such as Haven Court.

However significant challenges remain with healthy life expectancy remaining largely unchanged. We have more people living in ill health and therefore potentially requiring support from health, care and third sector services, and poor health and wellbeing indicators in childhood - such as low breastfeeding rates, high smoking in pregnancy rates, and high levels of childhood excess weight and high rates of childhood injuries.

This stock-take and refresh are timely given the progress made by the HWBB and the significant shifts in policy and direction across local government, health and social care, the third sector and with partners. As this is a refresh of the strategy, our vision for health and wellbeing remains the same:

To work in partnership to improve the health, wellbeing and quality of life for our children, adults and families and reduce health inequalities, to help people live longer and healthier lives.

The wider context for that vision also remains the same, with the South Tyneside Partnership continuing to focus on ensuring that South Tyneside will be an outstanding place to live, invest, and bring up families as part of the South Tyneside Vision.

We have outlined the five outcomes we are aspiring to in South Tyneside. Each outcome has one key priority to deliver over the next five years to achieve this, as well as some additional broader priorities that recognises the range of needs and challenges in South Tyneside. We have also outlined the way we will deliver our strategy through our partnerships and relationships, and how we will monitor our progress.

Our strategy was co-produced with the third sector, communities and members of the public

South Tyneside Health and Wellbeing Strategy

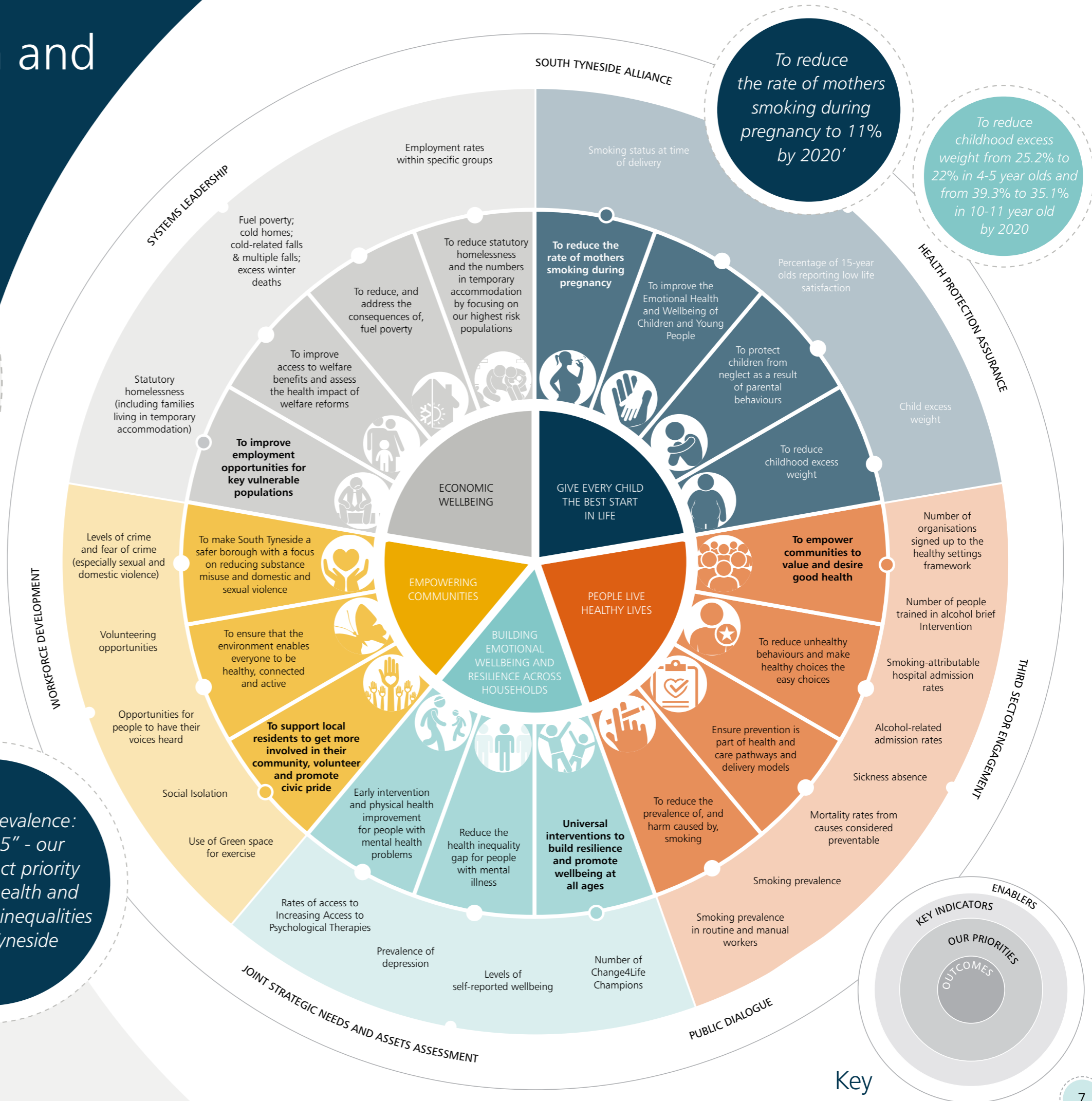
Our Health and Wellbeing vision:

"Work in partnership to improve the health, wellbeing and quality of life for children, adults and families and reduce health inequalities, to help people live longer and healthier lives."

Deliverables

- Alcohol strategy building on Public Health England evidence base
- Integrated locality teams for children and family services
- Local plan with health at its centre
- Delivery of care closer to home for adults - Developing our integrated community model
- Community led approach to supporting healthy behaviours
- Learning disability transformation
- Implement a smoke free model at South Tyneside NHS Foundation Trust

"Smoking prevalence: 5% by 2025" - our highest impact priority to improve health and reduce health inequalities in South Tyneside



The South Tyneside Vision

The South Tyneside Partnership has outlined a vision (2011-2031) that "South Tyneside will be an outstanding place to live, invest, and bring up families". To achieve our overall vision we have agreed 10 strategic outcomes under the themes 'People' and 'Place'. These are the things we will achieve over 20 years:

People

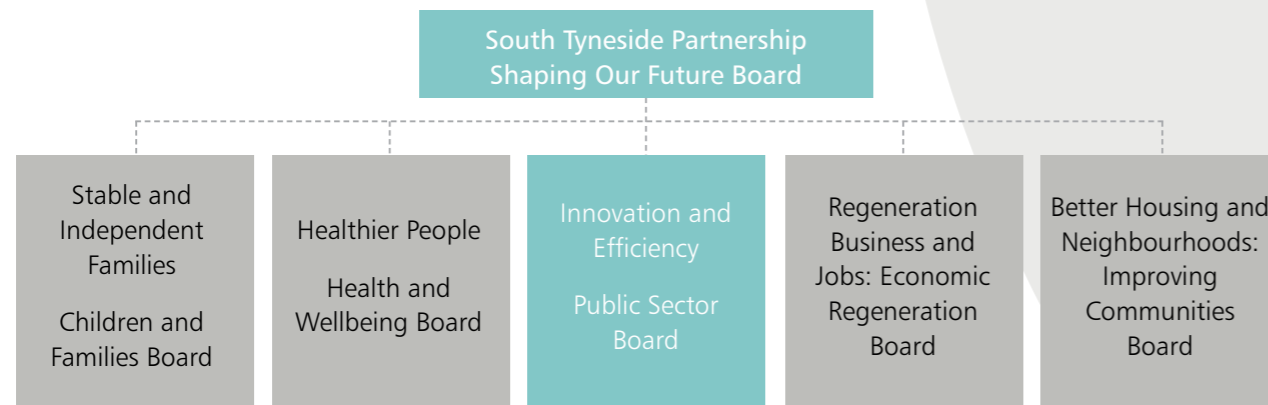
- Better education and skills
- Increasing prosperity
- Promoting independence and enablement
- Safer and stronger families
- Healthier people

Place

- A regenerated South Tyneside with increased business and jobs
- Better transport
- Better housing and neighbourhoods
- A clean and green environment
- Less crime and safer communities



With less public money available we need to work even more closely with our partners and communities to share and pool local public resources as well as rethinking how to use them to best effect. The South Tyneside Partnership is shaped to deliver our strategic outcomes. The 'Shaping Our Future Board' is supported by five strategic boards to deliver our community priorities - one of these boards is the Health and Wellbeing Board.



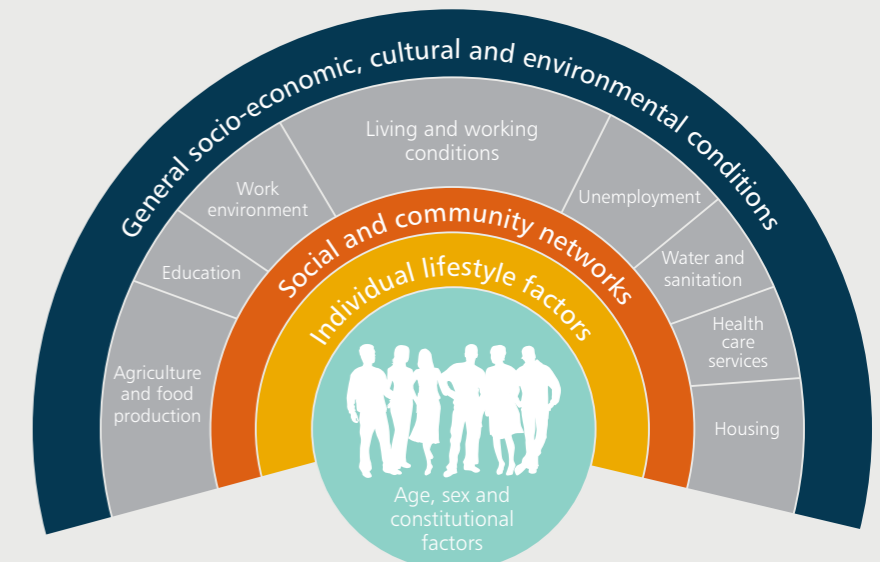
The vision of the Partnership truly encapsulates a broader vision for health and wellbeing in South Tyneside, bringing together the various wider-determinants of health. This recognises that we will not improve population health and wellbeing, such as healthy life expectancy and the outcomes of our children simply through more health and care services. The way we will improve our health and wellbeing is through tackling the root causes of ill health and unhealthy behaviours, and this is reflected in our model of health and wellbeing.

Our Model of Health and Wellbeing

In South Tyneside we take a holistic view of health and wellbeing, based on the long established Dahlgren and Whitehead model. The model recognises that improving health and wellbeing is a complex challenge and that we need to address socio-economic challenges, the wider environment, employment, education etc. if we are ever going to make an impact on unhealthy behaviours, ill health and early death.

In using this model locally we have focussed our strategy on the wider determinants of health (such as reducing fuel poverty), community resilience and assets (such as creating healthy spaces and connecting with communities), and prevention approaches (such as supporting pregnant mothers to stop smoking). This is not to say that health and care services are not important, but we view the structure and supply of services as a means to achieve population health and wellbeing, not an outcome themselves.

This is supported by the recent NECA commission on Health and Social Care Integration. The commission's report, Health and Wealth - Closing the gap in the North East, concludes that despite having some of the best health and care services in the country, indicators on health, wellbeing and life expectancy still lag behind those in England. The report recommends that there is significant shift towards prevention by the North East system and that the wider economic challenges are addressed as part of health strategy, not just economic strategy. In particularly the report highlights the relationship between health and wealth as "two-sides of the same coin".



Life-Course Approach

Our strategy uses a "life-course" approach to health and wellbeing, recognising that health risks are cumulative over a person's lifetime. By taking this approach the Board acknowledge that prevention should be prioritised over and above cure. As part of the strategy, the board considered the six objectives proposed by sir Michael Marmot on his work on the social determinants of health and has embedded these in our local strategy:

- Give every child the best start in life
- Enable all children, young people, and adults to maximise their capabilities and have control over their lives
- Create fair employment and good work for all
- Ensure a fair standard of living for all
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill-health prevention

Pause and Reflect - What have we achieved since 2013?

Our Better Health and Wellbeing Strategy was a three year strategy. During that time there has been a number of notable successes, such as the development of the Change4Life integrated wellness approach, the successful integration of Community Teams in Hebburn, becoming a first-wave national Pioneer site and the development of the Better U approach to self-care, the development of pooled commissioning budgets, the completion of the Building Schools for the Future programme and continued good Ofsted performance of local schools, significant progress on the regeneration of Hebburn Central, South Shields Town Centre, and the coastal strip, including the development of the Haven Point leisure facility. There have also been large public health successes, such as halving the number of teenage pregnancies since 2009, and the adult smoking prevalence falling from around 25% in 2010 to less than 18% in 2015.

Key Health and Wellbeing Successes

Change4Life South Tyneside was formally launched - quality standards have been developed and 8 third sector organisations have been awarded the standard, alongside the **Healthy School Award and the Better Health at Work Award** celebration.



Pioneer Self-Care Programme - comprehensive programme across the health and social care system, aiming to support residents to self-care



Integrated Community Teams - now located at Clarendon, reducing duplication and supporting more people to live at home with health and social care support

Haven Court - A new integrated care hub, primarily for adults with dementia, providing crucial reablement to support people to move back home following hospital admissions

Local action on tobacco

In 2015 there has been a high level of local action on tobacco. The Health and Wellbeing Board has remained committed to regional and local partnership working to reduce the harm caused by tobacco. It supported an ambitious target of 5% of people smoking by 2025. If we continue at the current rate of reduction this could be achieved and would result in fewer people dying prematurely from smoking related illnesses

Smoking Commission

South Tyneside's People Select Committee (a committee of the council which scrutinises services and organisations) set up a Commission in 2015 to tackle smoking rates and consider a range of measures to raise awareness of the harm of smoking as well as innovative ways of encouraging people to quit. This meant that local action was scrutinised and challenged. It resulted in a series of recommendations for attention. This included increased work on poverty and smoking, additional support for communities with the highest levels of smoking to give up and for the local NHS Foundation Trust to go 'smoke free'

"Smoking prevalence: 5% by 2025" - our highest impact priority to improve health and reduce health inequalities in South Tyneside

Successes in Improving the Wider Determinants of Health



Over **13,000** homes made decent; **£251m** invested



£370m total invested in housing stock

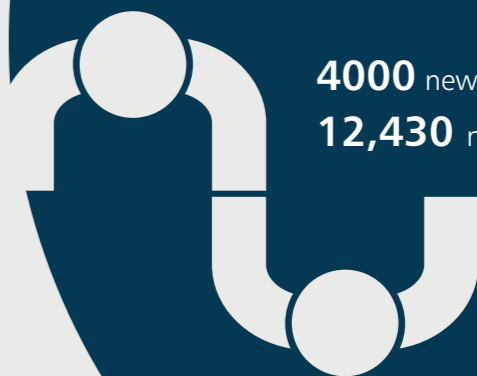


Homelessness (the number of applications accepted and in priority need) has **decreased** over the last 5 years with the number of cases standing at 211 for 2015/16 compared to 353 in 2011/12

More people are in **employment** now than in 2010



4000 new business start-ups, **12,430** new apprenticeships



Our health and wellbeing

BIRTH

SMOKING IN PREGNANCY

Every Year around 350 children are born to mothers that smoke. 21.8% of mothers smoke at the time of delivery compared to 10.6% nationally.



BREAST FEEDING

Around half of mothers initiate breast feeding within 48 hours of delivery. Less than a quarter of babies are breastfed by their 6-8 week check, nationally it's almost half



CHILDHOOD OBESITY

Almost 4 out of 10 10-11 year olds are overweight or obese. Nationally it's just over a third.



CHILD INJURIES

173 hospital admissions for injuries, a rate of 209 per 10,000 0-4 year olds.



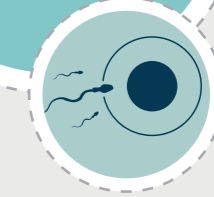
GCSE RESULTS

57.9% of children achieved 5 A-Cs including English and Maths, slightly higher than the England rate of 57.1%.



TEENAGE CONCEPTION

Around 3 conceptions in every 100 teenage girls, 30.7 per thousand compared to England's 28.5.



ALCOHOL

52% of people are increasing/high risk drinkers.



PHYSICAL ACTIVITY

Less than 4 out of 10 adults are physically inactive. Locally 37.2% and in England 28.7%.



DEATHS FROM CANCER

483 cancer related deaths in 2015. 27.7% of deaths were cancer related, in line with the national average.



EARLY DEATHS

550 Early deaths per year. 24.5% higher than the national rate.



SMOKING

4.3% of 11-15 year old's regularly smoke, England's rate is 3.1%. This jumps to 19.6% in 16-17 year-olds, the national rate is 14.7%.



NOT IN EDUCATION, EMPLOYMENT OR TRAINING

Around 290 16-18 year-olds not in education, employment or training. That's 5.7% compared to England's 4.2%.



DIET

Half of adults eat their "5 a day". 51.7% locally compared to 52.3% nationally.



UNEMPLOYMENT

Over 1,000 people are in long term unemployment, claiming job seekers allowance for over 12 months. That's 1.1% of 16-64 year olds, nationally it's 0.4%.

DEPRESSION

Almost half of social care service users, 49.7%, report feeling anxious or depressed. That is lower than the national average of 52.8%



FALLS

Over 600 injuries in persons aged 65+ annually. The rate is slightly lower than the national average.



LONG TERM CONDITIONS

12% said their day-to-day activities were limited a lot because of a health problem or disability, over 18,000 residents. Nationally it's just 8%



DEMENTIA

Over 1,500 South Tyneside residents are registered as having dementia



END OF LIFE

Challenges we still face

Three years on, there remain significant health and wellbeing challenges and there are a number of developments that mean it is pertinent to review local progress to date, sense-check local priorities, and reaffirm local partnership commitment to areas of collective concern.

Major contextual changes since 2013, for example, include:

- **Continued pressure on the “South Tyneside Pound”** - with reductions to the local authority and public health grants, coupled with changes to the NHS and public health funding allocation formulas. There is increasing pressure on NHS and care providers to increase efficiency while increasing care standards. There has also been continued austerity across the wider-public sector impacting on key partners such as the Police and probation,
- **Policy changes resulting in greater integration between health and social care** - the publication of the NHS Five Year Forward View and with that the NHS England requirement that localities develop a shared vision of how the local system will survive and be sustainable, and that this is articulated in a 5 year Sustainability and Transformation plan. There are also additional shared targets and pooled budget arrangements such as the Better Care Fund and Learning Disabilities Transformation Programme,
- **Continued education reform** - with ever more schools becoming Academies, and schools gaining greater financial and academic independence,
- **The implementation of the Care Act** - providing greater clarity on local duties and the rights of people and carers to assessments and support, as well as updating the way care is funded and provided,
- **Increasing emphasis on creating sustainable NHS provision** - for example, national reviews of stroke and maternity, and the regional Vanguard on emergency care. This will require greater collaboration across localities to ensure that NHS services are safe and sustainable.

The Joint Strategic Needs and Assets Assessment (JSNNA) is South Tyneside’s assessments of the current and future health and social care needs of the local community as well as needs that could be met by the local authority, CCGs or NHS England. The local JSNNA does not just consider the needs of people in South Tyneside; it also identifies the wider determinants of people’s health and wellbeing and considers the local assets that help keep people healthy.

The Board agreed a new process for the JSNNA in 2015, based on a more iterative assessment of needs. There is no prescriptive process for how Health and Wellbeing Boards should use the JSNNA and how they should develop their Joint Health and Wellbeing Strategies accordingly.

The local JSNNA continues to flag that South Tyneside needs reduce the gap between more affluent and deprived communities, focussing on:

- Preventing ill health as a priority by creating the right environment for children, families and adults to live healthy lives, through good education, housing and employment, and reducing poverty,
- Give every child the best start in life and reduce the risk of harm, including from child sexual exploitation, through early help and support,
- Tackling unhealthy behaviours, particularly smoking, alcohol use, lack of physical activity and unhealthy eating,
- Work collaboratively to plan and deliver cost-effective services for people with longterm conditions, multiple diseases, and the associated impact of an ageing population; with a particular emphasis on positive mental health,
- Reduce the number of early deaths for cancer, cardiovascular diseases and respiratory diseases.

These challenges are also clearly outlined in the Annual Report of the Director of Public Health.

There are 97 premature deaths from lung cancer per 100,000 residents in South Tyneside each year, the 5th highest rate in the country. 86% of lung cancers are known to be caused by smoking

Our Renewed Commitment and Focus

In order to refresh and renew our focus as a Health and Wellbeing Board we’ve engaged with a broad range of partners, partnership groups (including the third sector) communities and members of the public. As part of the engagement work we considered the outcomes and priorities that we want to achieve for South Tyneside.

Our Prioritisation Principles

In developing our refreshed set of outcomes we asked our local stakeholders to state the principles we should work towards when deciding what our priorities should be. Stakeholders came up with the following:

- Prevention first, treatment second
- Reduce health inequalities
- Consider continuity of services
- Build on existing assets
- Support and empower the workforce
- Consider high impact areas - those that give the greatest population impact
- Use evidence to drive change
- Promote independence
- Consider the health impact over the short and long term
- Protect vulnerable populations and promote inclusion
- Evidence need for action
- Achievable
- Amenable to partnership working
- Consider statutory duties but be creative with solutions
- Cost effective and sustainable approaches

The Children and Young People also considered some additional principles when making their decisions. These included:

- Considering the morally right priority
- Consider the consequential impact of the priority



Give Every Child the Best Start In life

What happens in pregnancy and early childhood impacts on physical and emotional health all the way through to adulthood.

Supporting good maternal health is important for safe delivery and good birth weight to give babies the best start. The prevention of adverse health factors in pregnancy is vital. Premature and small babies are more likely to have poorer outcomes.

Our Key Priority - To reduce the rate of smoking in pregnancy

Rationale

- South Tyneside has consistently higher levels of smoking in pregnant women than the regional and England average
- The effects of smoking on the mother and baby can cause significant harm
- Quitting smoking during pregnancy is one of the best things a mother can do to ensure their child has the best start in life

What we will do

1. Work with NHS partners to ensure the review of maternity services is supportive of reducing smoking at time of delivery. In particular we propose some key indicators to be included within the contract monitoring:
 - Smoking at the time of delivery - Provider. Target 15%.
 - Carbon Monoxide screening at the time of booking for all women. Target >95%
 - All midwives trained in smoking cessation brief advice. Target 100% by Quarter 3 2017/18.
2. The evidence base shows that incentive schemes are effective in helping pregnant women to quit smoking. A local incentive scheme has been developed and will be implemented in 2017
3. Produce a piece of theatre in education which can be rolled out to South Tyneside secondary schools to prevent young people from taking up smoking and emphasising the benefits of quitting during pregnancy
4. Implement lessons from the Babyclear evaluation
5. Maintain focus on the continuous pathway improvement process which is now in place

Priorities

Priority	What we will do
To improve the emotional health and wellbeing of children and young people	Ensure the children's work force have the skills required to support children's emotional health and wellbeing, increasing resilience and reducing vulnerability to risks such as child sexual exploitation
To reduce childhood excess weight	Adopt a partnership approach to reduce childhood excess from 25% to 22% in 4-5 yr olds, & from 39% to 35% in 10-11 yr olds by 2020
To protect children from neglect as a result of parental behaviours	To ensure family assessments are identifying and addressing both the needs of the child and parent to reduce the negative impact of Domestic Violence, Substance misuse and Mental illness To work in partnership with adult services (cross reference to the community safety and healthy people healthy communities outcomes)

People Live Healthy Lives

There is overwhelming evidence that changing people's health-related behaviour can have a major impact on some of the largest causes of mortality and morbidity. In South Tyneside we have around 32,000 people who exhibit multiple unhealthy behaviours, such as smoking, poor diet, much alcohol or not enough Physical Activity.

Our Key Priority - To empower communities to value and desire good health

Rationale

- We need to encourage people who are not yet motivated to opt into services. This requires challenging the wider acceptance of certain risky behaviours in certain communities and shaping services to recognise the need to improve engagement and motivation of service users
- This needs to be community based looking at the effective models of visible recovery and community activism as seen in other areas of risky behaviours such as drug and alcohol treatment and recovery communities
- It will be in the long run more cost effective and looks at the basis of public health population wide health improvement

What we will do

1. Adopt a settings approach to ensure that healthy behaviours are promoted and access to health improvement support is facilitated in a range of settings, including workplaces, schools, community centres and primary care
2. Continue to target and evaluate Change4Life and A Better U (self-care) to ensure the greatest impact on improving the health behaviours of our most vulnerable populations
3. Engage with membership organisations such as faith groups, leisure and social clubs to promote health improvement activities and facilitate access to services

Priorities

Priority	What we will do
Ensure prevention is part of health & care pathways and delivery	We will ensure that reviews and remodelling exercises of health and care services include a clear focus on prevention and self-care. This includes work on the big three causes of early death (cancer, respiratory disease, and cardiovascular disease) as well as work on adults social care and the development of our community services model
To reduce unhealthy behaviours and make healthy choices the easy choices	This work includes the Change4Life programme; Better Health at Work Award, partnership working on reducing the impact of hot food takeaways and making health a central part of the Local Plan
To reduce the prevalence of, and harm caused by, smoking	The South Tyneside Tobacco Control Alliance meets on a regular basis to oversee the implementation of a partnership action plan to tackle 4 key areas of tobacco harm: smoking in pregnancy; young people starting to smoke; smokers with a long-term condition and communities who are vulnerable to smoking

Building Emotional Wellbeing and Resilience across households

Having good mental wellbeing is important to people's quality of life and the capacity to cope with life's ups and downs. South Tyneside has lower levels of self-reported wellbeing and higher levels of mild to moderate mental health problems compared to the national average.

Our Key Priority - Universal and targeted interventions to build resilience and promote wellbeing at all ages

Rationale

- Mental health and wellbeing links to all other priorities - good health improves wellbeing and good wellbeing improves health
- Building resilience helps people and communities cope with difficult circumstances
- Evidence shows that developing coping skills can prevent mental health problems and improve wellbeing

What we will do

1. Maximise opportunities to build resilience and improve wellbeing and reduce social isolation (particularly in our vulnerable groups) through promoting the protective factors for good mental wellbeing
2. Ensuring that local organisations, community groups, services and partnerships raise awareness and support people to take part in activities involving each of the five-ways to wellbeing
3. Creating opportunities for social participation via a range of activities e.g. volunteering, community involvement, peer support programmes etc
4. Making use of and active promotion of available community resources e.g. community associations that support social inclusion and improve health and wellbeing
5. Developing social prescribing through local health and social care professionals - for example, primary care staff
6. Implementing the action plan from the DPH report on embedding community led approaches across the Borough

Priorities

Priority	What we will do
Early intervention and physical health improvement for people with mental health problems	Facilitate better engagement of people with mental health problems with the C4Life programme and a Better U. Improve access and take-up of NHS health checks and other population screening programmes for people with mental health problems
Reducing the health inequality gap for people with mental health problems	Raised awareness, recognition and increased access to IAPT scheme. Workplace support via Better Health At Work scheme Training frontline staff to be more aware of Mental Health problems - Making every Contact Count, Life Worth Living Training, Dementia awareness Identifying and targeting vulnerable groups e.g. Carers, older people, DV, socially isolated and those with Long-term Conditions for depression screening and participation in local community activities. Implement local suicide action plan

Empowering Communities

Community empowerment is about creating the conditions that allow people to take an active role in the decisions that influence their lives and health. We want to work in a way which encourages and supports communities to take part and influence decisions, services and activities and instils a belief that they can make a difference. Organisations also need to work in ways which increase people's skills, knowledge and confidence to look after their own health and wellbeing. The idea is that statutory organisations cannot solve everything themselves, and neither can communities, therefore it is better when we work with each other.

Our Key Priority - To support local residents to get more involved in their community, volunteer and promote civic pride.

What we will do

Provide strategic leadership to ensure that South Tyneside delivers a co-ordinated approach to engagement of local residents through volunteering, in decision making and by harnessing the assets, strengths, networks and resources of our local communities through the Third Sector Strategy

Rationale for key priority

- It has the ability to affect the biggest numbers in the population (Community safety only affects 3% in comparison)
- It has the potential to improve all aspects of wellbeing and can increase capacity in services
- Having pride in community can also improve wellbeing and impact on crime/disorder through increased civic pride

Priorities

Priority	What we will do
To make South Tyneside a safer borough with a focus on reducing substance misuse and domestic and sexual violence	Provide strategic leadership to ensure the local Community Safety Plan is implemented to prevent crime, deal with anti-social behaviour, domestic & sexual violence, increase community confidence and putting victims first
To ensure that the environment enables everyone to be healthy, connected and active	Provide strategic leadership to ensure that health is at the heart of the new Local Plan, and in particular to ensure that we work at a partnership level to maximise the use of green space for exercise; reduce the impact of hot food takeaways; promote active travel; promote community cohesion

Promote Economic Wellbeing

Economic well-being is a person's or family's standard of living based primarily on how well they are doing financially. Things such as employment, housing, and welfare all make up a person's economic wellbeing which is an integral part of a person's overall health and wellbeing.

Our Key Priority - To improve employment opportunities for key vulnerable populations

Rationale

- Good employment promotes emotional wellbeing and connectedness
- Employment also reduces the risk of homelessness and fuel poverty
- Addressing the needs of vulnerable populations contributes to improving health and reducing both health inequality and health costs

Priorities

Priority	What we will do
To reduce statutory homelessness and the numbers in temporary accommodation by focusing on our highest risk populations	Reductions in homelessness will remain an expressed aim for key groups, particularly problem/chaotic street drinkers, in the Blue Light Programme/MEAM (Making Every Adult Matter) and retendered Substance Misuse Service. Several funding opportunities will be pursued 2017/18 including the Life Chances Fund
To reduce, and address the consequences of, fuel poverty	Maintain Fuel Poverty and Falls Prevention Group(s) with accompanying plans including the promotion of winter plans, PHE Cold Weather Plan, flu programmes, energy efficiency, warm homes and falls prevention
To improve access to welfare benefits and assess the health impact of welfare reforms	Welfare Reform will focus on the introduction of Universal Credit for 2017/18 and will be steered by the South Tyneside Universal Credit Strategy Group. The overall aim of the multi-agency Group is to ensure that South Tyneside is best prepared for dealing with the implementation, impacts and implications of the Government's UC programme including; Housing Benefit which affects both the private-rented sector and the social-housing sector; supported and specialist housing and the Benefit Cap; disability benefits with the replacement of Disability Living Allowance for Personal Independence Payments and the migration of Incapacity Benefit claimants to Employment Support Allowance

What we will do

1. Focus on the employment of particularly vulnerable groups:
 - Military Veterans
 - Blue Light Clients
 - People with a Learning Disability
 - People Accessing Mental Health Services
 - People with a Sensory Impairment
 - NEETS - young people not in education, employment or training
2. Support the implementation of the North East Mental Health & Employment Trailblazer
3. Ensure public and private sector employers adhere to equality guidance and legislation
4. Implement guidance on stress management and the effective promotion of wellbeing and physical and mental health at work
5. Develop greater security and flexibility in employment, by:
 - Prioritising greater flexibility of retirement age
 - Encouraging and incentivising employers to create or adapt jobs that are suitable for lone parents, carers and people with mental and physical health problems

Deliverables

Our strategy is an "outcomes focussed" strategy allowing the partnership to identify the detail required to address those outcomes. However, there are a number of deliverables the Board is committed to achieving by 2021:

Alcohol strategy building on Public Health England evidence base

- alcohol continues to be one of the biggest public health challenges of the century and this is apparent in South Tyneside - with high rates of cancer, other alcohol related illness, and alcohol-attributable hospital admissions. PHE have recently published a comprehensive evidence review on alcohol that we will review and incorporate into a refreshed local strategy.

Integrated locality teams for children and family services

- there are a number of health, care and wellbeing challenges facing children and families in South Tyneside (particularly issues like childhood unhealthy weight and childhood injuries). Following the success of developing integrated community teams for adults, we are currently developing options for co-ordinating and integrating services for children (including public health, health and care). The purpose of the work is to provide a clear early help offer within South Tyneside, improve outcomes for families, improve joint working to reduce duplication and avoid fragmentation, increasing positive information sharing, reducing or managing demand on specialist services and to empower parents to become resilient families.

Local plan with health at its centre

- South Tyneside Council has outlined a process of conducting a health impact assessment of the Local Plan for South Tyneside. The National Planning Policy Framework 2012 (NPPF) states that "local planning authorities should work with public health leads and health organisations to understand and take account of the health status and needs of the local population, including expected future changes, and any information about relevant barriers to improving health and wellbeing".

There are clearly massive opportunities to support the health and wellbeing of people in South Tyneside by planning and structuring our borough in ways that, for example, increase levels of physical activity and reduce the access to unhealthy, high energy, fatty foods.

South Tyneside Council are working to ensure that each decision by the borough answers the questions: "what will this do for the health and wellbeing of the population?" And "will this reduce health inequalities locally?"

Delivery of care closer to home - Developing our integrated community model - South Tyneside health and care partners have a long history of successful partnership working and have agreed the following person-centred vision for integration:

"I can promote my own health and wellbeing by planning my care & support with people who work together to understand me and my carers, allow me control and bring together services to achieve the outcomes important to me"

As part of NHS and local government service transformation we are working in partnership to develop a clear model of community services that support the "right care at the right time" and the best use of the South Tyneside Pound. This community model will be developed by the South Tyneside Alliance.



Community assets approach to supporting healthy behaviours - We will ensure all key statutory partners sign up to our local 'community led approaches framework' which will enable all local people to have a greater say and active role in their health and wellbeing. We will also need to work with our local communities to increase people's skills, knowledge and confidence to look after their own health and wellbeing through behaviour change. We will continue to identify the assets in our local communities that can support healthy behaviour through the JSNAA.

Learning disability transformation - Achieving improvements in the way we commission and provide services for people with learning disabilities is a high level national objective. Previous strategies have failed to promote independence and keep people safe from harm. People with learning disabilities experience significant health inequalities. They die earlier from preventable illness and are at higher risk of abuse than the non-learning disabled population. We are an outlier regionally for our overreliance on hospital beds (although this is not the case in South Tyneside, this work aims to keep us in this position). Health and social care for people with learning disabilities is one of the most costly and complex areas for which we are responsible. We will work to bring together disparate services for the provision of care for people with learning disability into a single team. The team will provide holistic and on-going care to our learning disabled population. There will be a move away from episodic care towards ongoing support.

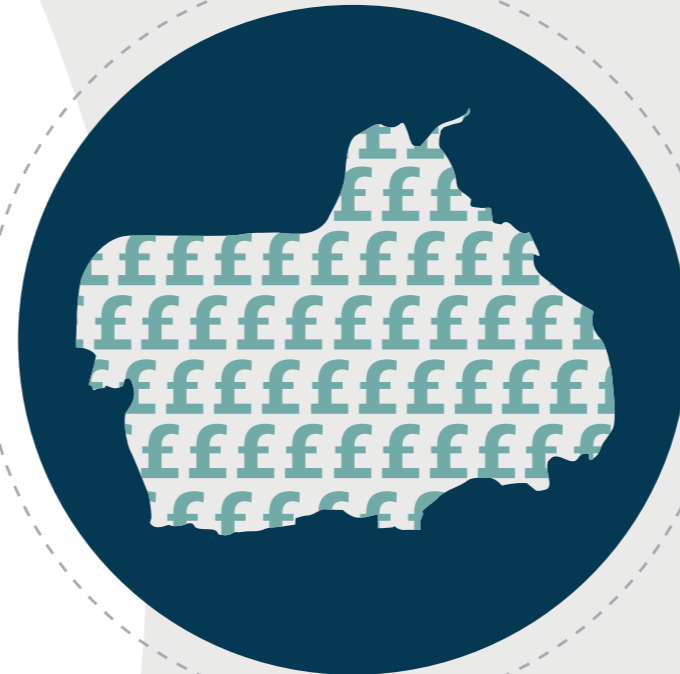
Implement a smoke free model at South Tyneside NHS Foundation Trust - Stopping smoking at any time has considerable health benefits for people who smoke, and for those around them. For people using secondary care services, there are additional advantages, including shorter hospital stays, lower drug doses, fewer complications, higher survival rates, better wound healing, decreased infections, and fewer re-admissions after surgery.

Smoking remains the single largest cause of premature mortality and therefore South Tyneside has committed to further collective action on smoking. One clear statement of action is that STFT (with support from partners) has committed to implement the NICE smoke free hospitals model which is a comprehensive approach to tackling smoking which includes; supporting people to quit before their planned surgery, smoke-free grounds, training for staff, support for patients to quit in hospital, and staff stop smoking services.

Tobacco dependency is a long term and relapsing condition that usually starts in childhood; treating it is the highest value intervention for today's NHS and Public Health system, saving and increasing healthy lives at an affordable cost.

Supporting Themes, Cross Cutting Issues and Enablers

There are a number of themes that are consistent issues and assets across our local health economy. These themes apply across our whole strategy.



The South Tyneside Pound

There has always been pressure on the resources available for health and wellbeing. The demand and need for services has long outstripped the available finances, facilities and workforce. This imbalance has become even starker as Government Austerity has continued since 2010, putting pressure on all public sector organisations locally.

This common resource scarcity conundrum has become known locally as The South Tyneside Pound. Not only does this bring a sharper focus on maximising the health and wellbeing of the South Tyneside population with the available resources, but it also aims to stop the unnecessary (and often costly) movement of resources between public sector organisations, and the acknowledgement of secondary impacts of organisational actions.

Focus on reducing health inequalities

Health inequalities are differences between people or groups due to social, geographical, biological or other factors. These differences have a huge impact because they result in people who are worst off experiencing poorer health and shorter lives. All of our statutory organisations are committed to reducing health inequalities. We want to make sure that this strategy supports those people with the greatest need to have better health. As outlined throughout this strategy our approach is to address the wider determinants of health which will help to address inequalities e.g. by improving economic wellbeing, living conditions, giving children the best start in life and empowering communities. We are clear that to improve overall health and wellbeing we must work with communities and vulnerable groups to address health inequalities and ensure that our solutions are accessible and sensitive to need. We will continue to focus on working with population groups that experience health inequalities including those living in areas of high deprivation, black and minority ethnic communities, carers and people with learning disabilities.

"There is a social gradient in health - the lower a person's social position, the worse his or her health. Action should focus on reducing the gradient in health."

Sir Michael Marmot



Making it happen - Governance Structure for the Health and Wellbeing Board

The Health and Wellbeing Board (and the organisations represented on the board) are responsible for the delivery of this strategy. In delivering the strategy the Board recognises that the other Boards (and their delivery structures) within the South Tyneside Partnership that are best place to advise and lead on key strands of the strategy.

The South Tyneside Alliance - Systems Leadership

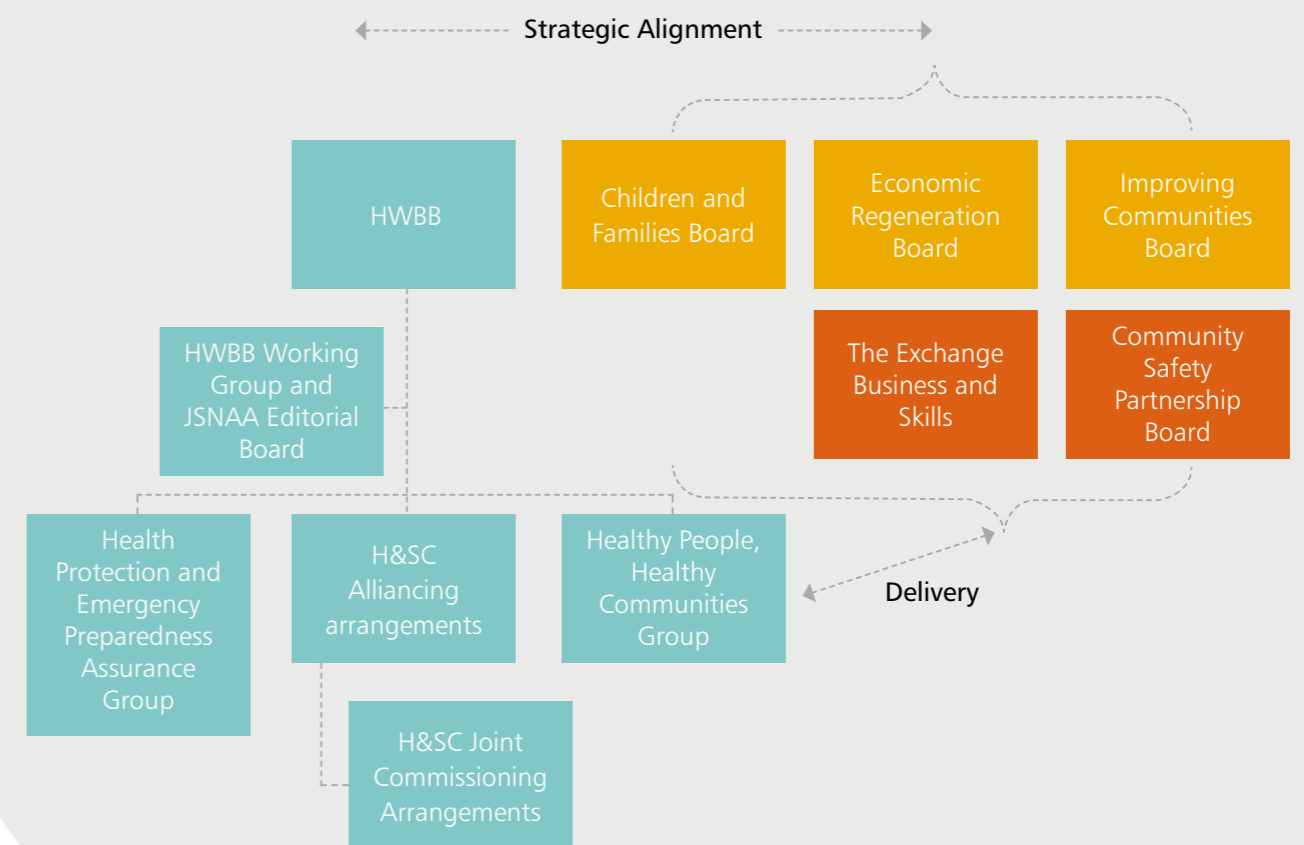
Through the pioneer programme, South Tyneside had the opportunity to learn from the alliancing approach developed by Canterbury District Health Board, a way of working based on spending the locality resources as wisely as possible, using collective decision-making and transparency, and working with frontline professionals and clinical staff to design services. Partners in South Tyneside have agreed to develop a similar approach and local alliancing principles which will mean decisions are based on what's best for the health and care system, and for individuals receiving services.

One of the key objectives of the South Tyneside alliance is to develop our local 'out of hospital' model. This will ensure that the delivery of health and social care services is coordinated and will support people to self-care and remain independent. We already have integrated health and social care teams in the community providing services to older people and people with physical disabilities.

Collaboration with the Third Sector and Communities

This strategy has been developed together with the third sector and communities and therefore represents the strong history of collaborative working in South Tyneside. We are committed to continuing this partnership working and recognise that our voluntary sector organisations have a crucial role in addressing the health and wellbeing needs of communities. Our diverse Third Sector is a valuable source of knowledge about local needs and gaps in services. As resources continue to be scarce across the whole system, collaboration and partnership is becoming ever more critical. As outlined above we want to create the conditions that enable people and communities to be active partners in their own health and care. The Third Sector has a key role in this as they are able to reach some of our most vulnerable, excluded individuals and communities. Therefore, we will take an even stronger focus in harnessing community assets across all outcomes in the Strategy, using approaches advocated in the 2015 Director of Public Health Report.

South Tyneside Partnership Shaping Our Future Board



In developing this strategy the HWBB has worked with the other partnership groups to develop and deliver several of the strategy outcomes. These outcomes will be developed as follows:

- **Empowering communities** - developed with the Improving Communities Board and its subgroups,
- **Economic wellbeing** - developed with the Economic Regeneration Board and its subgroups,
- **Giving every child the best start in life** - developed with the Children and Families Board and its subgroups,

The on-going delivery of the outcomes in this strategy will be done in conjunction with these partnership Boards, but co-ordinated through a single group under the Health and Wellbeing Board - the Healthy People, Healthy Communities group.

Healthy People, Healthy Communities

The Healthy People, Healthy Communities Group ([HPHCG] formally referred to as the Prevention and the Life course Group) will take a significant role in co-ordinating the delivery of the Joint Health and Wellbeing Strategy with other key partnership groups. The HPHCG will also take an explicit lead on developing and delivering 'People live healthy lives' and 'Building emotional wellbeing and resilience across households' outcomes. There are a number of priority workstreams that will continue to feed into the HPHCG including the Tobacco Alliance, Childhood Healthy Weight Action Planning Group, and the Smoking in Pregnancy Partnership.

The South Tyneside Alliance - health and social care

The developing South Tyneside Alliance will lead on all health and social care integration and partnership working arrangements using the principles of the South Tyneside Pledge and "what's best for the person is best for the system".

Health Protection and Emergency Preparedness Assurance Group

The Health Protection and Emergency Preparedness Assurance Group provides the statutory system-wide assurance on health protection and emergency planning issues to the Health and Wellbeing Board. The group also leads on monitoring screening and immunisation activity across South Tyneside, particularly in relation to reducing inequalities in uptake.

Leadership and Performance Monitoring

As well as receiving a general performance update on the strategy at each meeting, the Board proposes to focus on one meeting per year to each of the key outcomes outlined in this strategy on a rolling programme. This will allow the Board to have a "deep dive" on each outcome throughout the year, exploring the key challenges, progress and further action required to reach the desired outcomes for the South Tyneside population.

To ensure the delivery of the strategy there will be leads identified across the partnership who will own and report back on the key actions and priorities identified in the strategy. It is expected that all partners contribute to the delivery of the strategy, making best use of our collective resources.

Day-to-day management and delivery of the strategy will be co-ordinated by the healthy people healthy communities group under the Board. This group has a key leadership role in ensuring the strategy is delivered and that there is join-up between the other Boards and groups in the South Tyneside Partnership.

There are key indicators identified on the "plan on a page" that will form a single data dashboard for the board. This will be updated biannually for presentation to the Board.

Our Health and Wellbeing vision:

"Work in partnership to improve the health, wellbeing and quality of life for children, adults and families and reduce health inequalities, to help people live longer and healthier lives."

If you know someone who needs this information in a different format, for example large print, Braille or a different language, please call Marketing and Communications on 0191 427 1717.