

# Happier Healthier Lives

Nottingham City Joint Health and Wellbeing Strategy 2016 – 2020







## Contents

Foreword from the Chair and Vice Chair	3
Role of the Health and Wellbeing Board	4
Purpose of the Strategy	4
Development of the Strategy	5
Health and Wellbeing in Nottingham	6
Influences on Health	8
Our Vision, Aims and Outcomes	10
Delivery and Monitoring	11
Principles Underpinning the Strategy	11
Outcome 1: Healthy Lifestyles	12
Outcome 2: Mental Wellbeing	16
Outcome 3: Healthy Culture	18
Outcome 4: Healthy Environment	20
Our Headline Targets	23
Links to Other Strategies and Plans	24
Summary: Our Strategy on a Page	28
Appendix	30

## Foreword from the Chair and Vice Chair

Welcome to the Nottingham City Joint Health and Wellbeing Strategy 2016 to 2020, which sets out our vision and ambitions for making our city happier and healthier. Since the first strategy in 2012 we are pleased to see that overall people in Nottingham are living longer. In our new strategy, we now seek to improve the quality of that longer life – adding life to years not just years to life. We also remain committed to tackling the differences in health between our neighbourhoods and in the city as a whole compared to other similar cities. Tackling those inequalities remains at the heart of our new strategy.

The strategy has been developed based upon significant engagement with citizens and partners and alongside evidence of the health and wellbeing needs in the city. Using this knowledge we outline our objectives to meet our ambition to ensure 'Nottingham will be a place where we all enjoy better health and wellbeing, with a focus on improving the lives of those with the poorest outcomes the most'. We will do this by focusing on four outcomes:

- Children and adults in Nottingham adopt and maintain Healthy Lifestyles
- Children and adults in Nottingham will have positive Mental Wellbeing and those with long-term mental health problems will have good physical health
- There will be a **Healthy Culture** in Nottingham in which children and adults are supported and empowered to live healthy lives and manage ill health well
- Nottingham's **Environment** will be sustainable; supporting and enabling its citizens to have good health and wellbeing

Whilst people are living longer it is often with increasingly complex health needs, many of which are preventable. The activity in this strategy is designed to see a radical shift towards early intervention and prevention so

that we can improve health, reduce hospital admissions and when people are in need of hospital treatment they are able to return home quickly. With help and support - from before pregnancy to the end of people's lives - we hope to inspire and empower citizens to live happier healthier lives, protect themselves from ill health and, where necessary, support people to manage their own ill health as much as possible.

Our ambitions require change and integration across the entire health and social care system. This represents an outstanding opportunity to improve the lives of the people of Nottingham. As chair/ vice chair of the Health and Wellbeing Board, and reflecting the truly joint nature of the strategy, we are absolutely committed to its implementation. Member organisations will work together to deliver our ambitions and the board will serve to strengthen our commitments as partners.



Councillor Alex Norris Chair



Dr Marcus Bicknell Vice Chair

## Role of the Health and Wellbeing Board

Under the Health and Social Care Act 2012. all areas in England must have a Health and Wellbeing Board (HWB). The board is made up of:

- Representatives of citizens (Healthwatch Nottingham) and voluntary and community sector providers of health and social care services
- Organisations directly involved in commissioning and providing healthcare, including Nottingham City Council, NHS Nottingham City Clinical Commissioning Group, Nottingham CityCare Partnership, Nottinghamshire Healthcare NHS Foundation Trust and Nottingham University Hospitals NHS Trust, and NHS England
- Other organisations whose work impacts the health and wellbeing of citizens, including the Crime and Drugs Partnership, Nottinghamshire Police, the Department of Work and Pensions, Nottinghamshire Fire and Rescue Service, Public Health England, The University of Nottingham, Nottingham Trent University and Nottingham City Homes

The role of the board is to lead on work to improve the health and happiness of Nottingham and specifically to reduce health inequalities. It oversees joint commissioning and joined up provision for citizens and patients, including social care, public health and NHS services. It also considers the impact on health and happiness of the wider local authority and partnership agenda, such as housing, education, employment, and crime and antisocial behaviour.



## Purpose of the Strategy

The purpose of the strategy is to enable:

- All HWB partners and citizens to be clear about our agreed priorities for the next four years
- All members of the HWB to embed these priorities within their own organisations and ensure that these are reflected in their commissioning and delivery plans
- Key agencies to develop joined-up commissioning and delivery plans to address these priorities
- The HWB to add value to the planned activity and hold member organisations to account for their actions towards achieving the objectives and priorities within the strategy
- Members of the HWB to work with and influence partner organisations outside the HWB to contribute to the priorities agreed within this strategy

## Development of the Strategy

The strategy has been developed based upon evidence of health needs in the city and significant engagement with citizens, partners and stakeholders. A range of engagement

events were held to shape the strategy and almost 500 people provided their views on what was important to them1.



## Health and Wellbeing in Nottingham

A local assessment of current and future health and social care needs tells us what is causing people to become unwell or die prematurely (before the age of 75). This is why2:

#### Healthy Life Expectancy

Nationally and locally we are living longer but for some - particularly amongst those in our most deprived neighbourhoods - increased life expectancy3 is accompanied by many years of poor health. It has significant implications for people's health and happiness.

In Nottingham, healthy life expectancy4 (the number of years we can expect to live in good health) is 57.8 years for men and 58.4 years for women compared to a life expectancy of 77.1 years for men and 81.6 years for women<sup>5</sup>. This means that the local population can be expected to live approximately a quarter of their life in poor health. In comparison to the rest of the country, people in Nottingham die younger and are less healthy than most regions in England. Figure 1 (below) highlights how we compare to England.

Since 'life expectancy' is increasing at a faster rate than 'healthy life expectancy' we are spending a greater proportion of life in poor health. This has implications for both individuals - due to increased proportion of life spent with illness and disability - and society due to associated health and social care costs.

Whilst on average men and women in the city can expect to live in good health to around 58 years-old (figure 2). This figure masks significant differences between Nottingham's neighbourhoods. People in the poorest neighbourhoods on average experience poor health 17 years earlier than those in the wealthiest neighbourhoods (figure 2).

Figure 1: Healthy Life Expectancy in Nottingham compared to the England average

**Healthy Life Expectancy in** Nottingham City for men is...



**57.8 years** 

This is significantly lower than England, with **Nottingham City males living** 



5.5 years less

**Healthy Life Expectancy in Nottingham City for women** is...



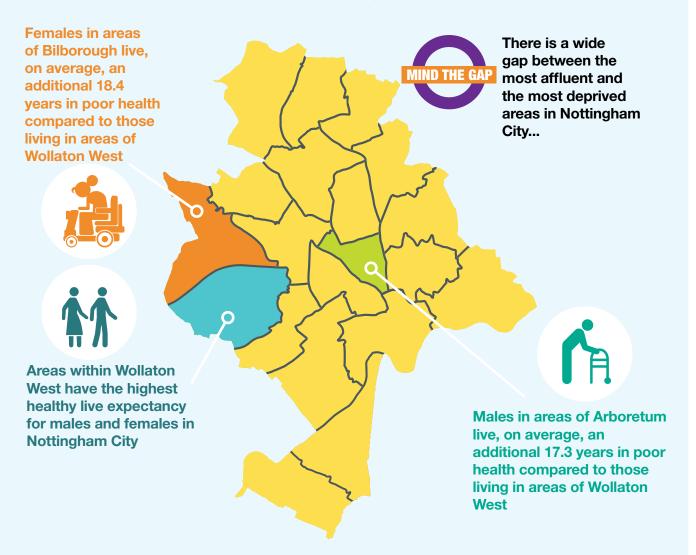
**58.4 years** 

This is significantly lower than England, with **Nottingham City females** living for...



5.6 years less

Figure 2: Healthy Life Expectancy across Nottingham's neighbourhoods



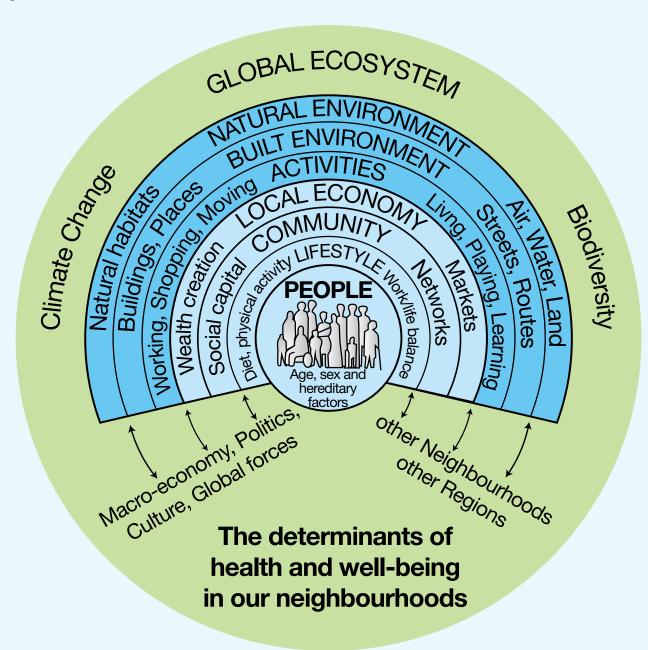
These inequalities in health represent unjust differences in health status experienced by certain population groups within the city. A wide range of factors contribute to these differences in health including the places we live, the communities we live in, the lives we lead and our access to services. Importantly these differences are preventable.

## Influences on Health

Many factors determine how happy and healthy we will be. Lifestyle factors – such as smoking, alcohol, diet and exercise – are strongly linked to our health. These lifestyle factors are influenced by where we live, economic deprivation, the quality of our housing and our neighbourhoods,

education, employment, lack of green open spaces and air pollution - to name but a few but they are all things that everyone can improve. Figure 3 shows some of the many factors that influence our health and happiness.

Figure 3: The wider determinants of health<sup>6</sup>



Source: Barton H, Grant M. A health map for the local human habitat. *Journal of the Royal Society for the Promotion of Public Health* 2006:126(6):252-261.



Living unhealthy lifestyles and poor socioeconomic conditions can lead to illnesses such as cancer, heart disease, diabetes and lung disease.

These conditions are more common amongst people from deprived neighbourhoods and certain Black, Asian and minority ethnic (BAME) communities<sup>7</sup>. The number of people with long-term conditions is increasing. This is partly due to the fact that we are living longer lives but it is also related to an increase in our unhealthy lifestyles such as physical inactivity, smoking, excessive consumption of alcohol and poor diet. These lifestyle causes are largely preventable and make a huge difference to our lives.

We also know that physical health and mental health are closely linked. People with mental health problems tend to have poorer physical health outcomes. Research shows that those suffering from serious mental illness, die up to 20 years earlier<sup>8</sup> and those suffering with depression have double the risk of heart disease<sup>9</sup>.

Mental health and lifestyle factors were common themes identified when we talked to communities as part of the engagement work that underpins our priorities. In addition, you told us that the culture within which we live and our environment play a big part in our health and happiness.

## Our Vision, Aims and Outcomes

We have established a clear vision and aim based on what citizens have told us.

## Our Vision

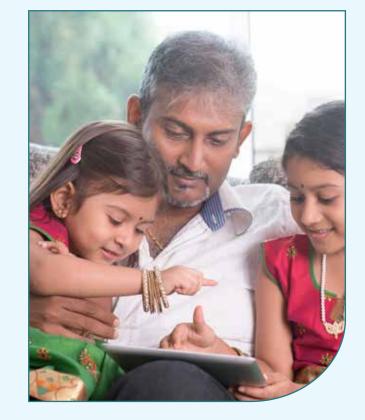
Nottingham will be a place where we all enjoy better health and wellbeing with a focus on improving the lives of those with the poorest outcomes the most.

This vision is underpinned by a commitment to achieve the following four outcomes:

- Outcome 1: Children and adults in Nottingham adopt and maintain **Healthy** Lifestyles
- Outcome 2: Children and adults in Nottingham will have positive Mental Wellbeing and those with long-term mental health problems will have good physical health
- Outcome 3: There will be a **Healthy Culture** in Nottingham in which children and adults are supported and empowered to live healthy lives and manage ill health well
- Outcome 4: Nottingham's **Environment**will be sustainable; supporting and enabling
  its citizens to have good health and
  wellbeing

#### Our Aim

- To increase healthy life expectancy in Nottingham and make us one of the healthiest big cities
- To reduce inequalities in health by targeting the neighbourhoods with the lowest levels of healthy life expectancy



## Delivery and Monitoring

Detailed action plans have been developed for each of the four outcomes and will be refreshed annually to ensure that they remain relevant<sup>10</sup>. The plans will be implemented by four delivery groups reporting to the Health and Wellbeing Board. In delivering the strategy, the Health and Wellbeing Board will monitor annually the headline targets (as outlined on page 23) and the performance indicators set out in the detailed action plans.



## Principles Underpinning the Strategy

A number of cross-cutting principles will be adopted across all action plans:

- A focus on communities or areas worst affected by tackling inequalities: Detailed action plans will identify and address any disproportionate impact. This could mean a focus on particular geographic areas or particular groups.
- Early Intervention: Activity will be targeted at identifying and preventing problems early before they become established and problematic.
- Sustainability: Action plans will consider the sustainability of their funding arrangements and the impact on health and the environment.
- Engagement of the Voluntary and Community Section: The action plans will value and utilise the role of the voluntary and community sector in developing and implementing interventions.
- Integrated Working: In order to improve citizen outcomes we know that health and social care services need to work better together to provide more effective and seamless care. Action plans will consider how they are furthering the need to integrate services where possible.



## Outcome 1: Children and adults in Nottingham adopt and maintain healthy lifestyles

Smoking, harmful use of alcohol, physical inactivity and poor diet are key lifestyle factors which both cause and affect the consequences of many major illnesses. In addition, unsafe sex can lead to unwanted pregnancies and sexually transmitted infections (STIs) including HIV.

Levels of smoking in the city are significantly higher than the national average and as a consequence rates of lung cancer, heart disease and other smoking-related diseases are much higher. Smoking is higher in areas of deprivation and a major cause of the inequalities in healthy life expectancy experienced across the city. Smoking during pregnancy is also a key concern as it increases the risk of complications of the pregnancy and the health of the child. Children who grow up in communities with a high proportion of smokers are more likely to become smokers themselves, emphasising the importance of taking a community-based approach.

Being overweight significantly increases the risks of developing and dying from diabetes, heart disease, cancer and kidney and liver disease. Research shows that 80% of children who are obese will become obese adults, further highlighting the need to tackle the issue early through physical activity and a healthy diet.

An individual's physical activity level, diet and nutrition status have a massive impact on health. A third of adults in Nottingham are 'inactive' and three-quarters do not eat enough fruit and vegetables11.

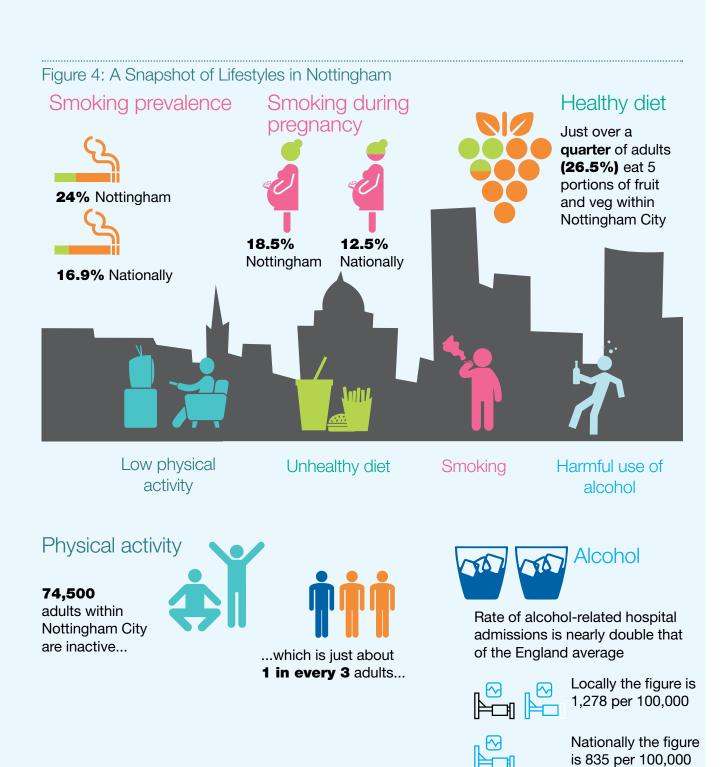
Alcohol-related admissions to hospitals in Nottingham are significantly higher than the England average and they are continuing to increase. Excessive alcohol consumption has a wide range of impacts for individuals - in terms of their mental and physical health - and upon families and communities in terms of

relationships, violence and anti-social behaviour.

STIs can lead to health complications and affect fertility. STI rates in Nottingham are significantly higher than the England average. HIV is a complex medical condition which makes it challenging for individuals to maintain a good quality of life. Early diagnosis of HIV leads to better outcomes but citizens in Nottingham are more likely to be diagnosed with HIV at a later stage. Teenage pregnancy is associated with poorer outcomes for mothers and babies. The teenage pregnancy rate in Nottingham is significantly higher than the England average.

Supporting the people of Nottingham to adopt and maintain healthy lifestyles will help prevent illnesses occurring in the first place for many people and postpone the onset or reduce the impact of disease for many others, improving life expectancy and healthy life expectancy in the city.





#### Healthy Lifestyles

#### Our priorities and what we plan to do

In order to achieve our outcome a number of broad priority actions have been identified. By 2020 Nottingham will be a city where children and adults will:

- Be physically active to a level which benefits their health
- Enjoy a healthy and nutritious diet
- Be able to achieve and maintain a healthy weight
- Be inspired to be smoke-free

#### Additionally,

- People who drink alcohol will drink responsibly, minimising the harms to themselves and those around them
- Young people and adults will choose to have safe sex reducing the risk of unwanted pregnancies and sexually-transmitted infections

#### To achieve the outcome and deliver our priority actions, we will:

- Give children and adults the skills and knowledge to prioritise healthy lifestyles
- Ensure there are opportunities to adopt a healthy lifestyle including access to services where necessary
- Ensure our workforce is equipped to identify and deliver brief intervention around healthy lifestyles and signpost to services when needed
- Motivate adults, children and young people to make healthy choices and avoid harmful behaviour
- Protect adults, children and young people from the harmful effects of other people's behaviour including smoking (e.g. smokefree public places) and excessive alcohol consumption





## Outcome 2: Children and adults in Nottingham will have positive mental wellbeing and those with long-term mental health problems will have good physical health

Mental health problems are very common – it is estimated that up to half of all people will experience problems at some point in their life and one-in-six will have a common mental health problem<sup>12</sup>. In Nottingham, there are estimated to be more than 51,000 people with a mental health problem ranging from those with a common problem like depression or anxiety to more severe disorders such as psychosis (figure 5). These estimates are considerably greater than the number of people recorded on local GP registers, suggesting that people with these conditions may not be getting sufficient support to meet their health and wellbeing needs<sup>13</sup>.

Mental health and wellbeing is a broad term and does not necessarily have to be defined by a 'mental illness'. Measures of mental wellbeing in the City suggest that 14% of citizens could be described as having poor mental wellbeing. Loneliness was the most commonly identified issue by citizens and is a key driver for poor physical and mental health.

Poor mental health is also closely linked to poor physical health as people with long-term mental health problems are four times more likely to die early. Most early deaths are from preventable causes that are similar to the wider population<sup>14</sup>. It is known that health services have not been as responsive in identifying or meeting the physical health needs of people with mental health problems in the past.

Preventing and treating mental health problems in childhood and adolescence is particularly important due to their far-reaching consequences on health, social and educational outcomes. Mental illness, unlike other health problems, tends to start early in life and can persist into and throughout adulthood<sup>15</sup>.

It is recognised that half of all mental health problems have started by the age of 14. It is estimated that one-in-ten children have a clinically recognisable mental health problem, with boys more likely than girls to be affected highlighting the importance of early intervention. There are also certain groups (inc. homeless people, armed forces veterans, Black, Asian and minority ethnic (BAME) communities) who may be at increased risk of mental health problems, or have specific needs in terms of their care, and so activity will be delivered to improve equity of access to treatment and care.



Figure 5: A Snapshot of Mental Health in Nottingham (people aged 16 and over)



One in six people will have mental health problems at any one time

#### At any one time it is estimated that there are...

41,000 people with common mental health problems like depression and anxiety

7,000 people with **Post Traumatic Stress Disorder** 

3,000 with severe mental health problems such as psychosis & personality disorders

## Mental Health and Wellbeing

#### Our priorities and what we plan to do

In order to achieve our outcome a number of broad priority actions have been identified. By 2020 Nottingham will be a city where:

- Children and adults with, or at risk of, poor mental health will be able to access appropriate level of support as and when they need it
- Those with long-term mental health problems will have healthier lives
- Those with, or at risk of, poor mental health and wellbeing will be able to access and remain in employment
- People who are, or at risk of, loneliness and isolation will be identified and supported

#### To achieve the outcome and deliver our priority actions, we will:

- Ensure that children and adults know how to get support for mental health problems
- Improve care to women who experience mental health problems during and after pregnancy
- Ensure access to mental health services within a primary care setting and early access to care for those with more serious mental health problems
- Provide access to wider social and community support for people with mental health problems and their carers to support social and financial inclusion
- Prevent poor physical health outcomes for those experiencing long-term mental health problems
- Increase understanding of the interdependence of mental and physical health16
- Help citizens to move towards recovery from mental illness
- Work with employers, and people with mental and physical health problems, to support them to access and remain in employment

# Outcome 3: There will be a healthy culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill health well

Our beliefs and attitudes towards our own health and those around us play a huge part in how healthy and happy we will be. The communities we live in, and the degree to which they encourage and promote healthy behaviour, have a massive impact upon our health. Social capital describes the links that bind and connect people within and between communities – and provide a source of resilience against life's stresses through social support. Throughout the engagement events many people told us that 'sense of community' had reduced and people saw this as having a big impact on health and wellbeing.

In particular one of the strongest themes to emerge was around loneliness and the importance of the community in supporting each other and fostering a healthy culture where the healthy choice is the easy choice. People wanted there to be more social interaction in neighbourhoods and saw the value in initiatives like social prescribing and identifying and tackling issues early before they developed into more serious long-term problems.

Debt and household income were consistently highlighted as the main driver behind poor physical and mental health; with not enough being done to help people prioritise healthy lifestyle choices. People also said that availability of services was not necessarily the issue. Rather it was not knowing which services and opportunities were available or not having the confidence to use them. Many people wanted to have clear information so that they could make healthier choices, manage their own health and only contact services if and when they needed them. When using services, however, the current system was said to be too complex and not joined up. At the same time people often felt their problems were treated in isolation - rather than holistically, by dealing with a range of underlying issues that were at the heart of the problem (like debt, unhappiness or loneliness).

#### Healthy Culture

#### Our priorities and what we plan to do

In order to achieve our outcome, a number of broad priority actions have been identified. By 2020 Nottingham will be a city where:

- Messages regarding health and wellbeing will be clear and consistent
- Citizens will have knowledge of opportunities to live healthy lives and of services available within their communities
- Individuals and groups will have the confidence to make healthy life choices and access services at the right time to benefit their health and wellbeing
- Services will work better together through the continued integration of health and social care that is designed around the citizen, personalised and coordinated in collaboration with individuals, carers and families
- We will reduce the harmful effects of debt and financial difficulty on health and wellbeing

## To achieve the outcome and deliver our priority actions, we will:

- Further integrate services for adults across health and social care, including through the creation of aligned commissioning and pooled budgets
- Create integrated health and social care services for young children (0 -5s)
- Ensure that citizens can access the right information and support services in one place
- Promote key messages around how to stay healthy and happy

- Support people to care for themselves and know when to access additional support
- Ensure our workforce is equipped to identify, and respond early, to issues affecting health and wellbeing including healthy lifestyles, debt management and social isolation
- Enable citizens to remain independent, and within their own homes, for as long as they are able to or choose to
- To work with public, private and voluntary sector partners to improve people's financial resilience



## Outcome 4: Nottingham's environment will be sustainable - supporting and enabling its citizens to have good health and wellbeing

The environment within which we live, work and relax plays a major role in our health and happiness. Cities and neighbourhoods that offer attractive green spaces and parks, well-maintained cycling and walking routes and access to nature can improve our health and make us happier. Increasing the number of people who regularly walk or cycle will provide a number of positive benefits from reduced air pollution and carbon emissions to addressing congestion and helping people live active, healthier and happier lives. As well as benefiting our health, healthy environments benefit environmental sustainability due to lower carbon and pollutant emissions.

Throughout the engagement events, citizens highlighted their concerns about air pollution and the importance of living in neighbourhoods where the built environment promoted healthy lifestyles such as active travel (like walking or cycling to work) and access to good quality parks and facilities for exercising and socialising.

A healthy environment is supported by strong scientific evidence. There is clear evidence of the adverse effects of air pollution<sup>17</sup> and poorer communities experience higher concentrations of pollution resulting in a higher prevalence of related diseases<sup>18</sup>.

Creating an environment in which people can live healthier lives with a greater sense of wellbeing is hugely significant in reducing health inequalities. An environment that encourages walking and cycling can also support the local economy, providing a vibrant and attractive neighbourhood<sup>19</sup>. Access to attractive green spaces, aside from encouraging physical activity, can also improve mental wellbeing and help support social inclusion and community cohesion<sup>20</sup>.

Poor-quality housing in particular has a big impact on both physical and mental health and wellbeing<sup>21</sup>. Housing inequality is a key determinant of the difference in health outcomes across the city. Those in the most deprived neighbourhoods are more likely to be living in the poorest-quality housing. The private rented sector is the area of most concern as this is likely to account for much of the poor-quality housing within the city.

#### Healthy Environment

#### Our priorities and what we plan to do

In order to achieve our outcome a number of broad priority actions have been identified. By 2020 Nottingham will be a city where:

- Housing will maximise the benefit and minimise the risk to health of Nottingham's citizens
- The built environment will support citizens leading healthy lifestyles and minimise the risk of negative impact upon their wellbeing
- Children and adults will be able to engage in active travel
- Children and adults in Nottingham will have access to and use of green space to optimise their physical and mental wellbeing
- Air pollution levels in Nottingham will be reduced

#### To achieve the outcome and deliver our priority actions, we will:

- Work with housing providers to support people to live healthy lifestyles, keep well and live supported at home when unwell
- Improve housing standards and support vulnerable people who may be at risk of becoming homeless
- Consider the impact of planning decisions upon health and wellbeing

- Improve the city's infrastructure and encourage more people to walk and cycle or use public transport
- Improve the quality of our green spaces and encourage their use by the community
- Raise awareness of the positive impact small changes in behaviour can have on the environment





## Our Headline Targets

The strategy's overall aim is to increase healthy life expectancy and reduce the inequalities across Nottingham's neighbourhoods. Healthy life expectancy describes how long a person might be expected to live in 'good health'22. Locally and nationally healthy life expectancy has remained fairly constant since it first started to be measured in 2009 but at the same time 'life expectancy' has increased meaning that people, on average, are spending a greater proportion of their life in poor health<sup>23</sup>. There are significant differences between Nottingham and other similar cities<sup>24</sup> and also amongst Nottingham's neighbourhoods (figure 2). The strategy aims to address this by improving the quality of life for people as they get older by increasing the number of years spent in good health.

Two headline targets have been set in order to measure our success in improving people's health and tackling inequalities:

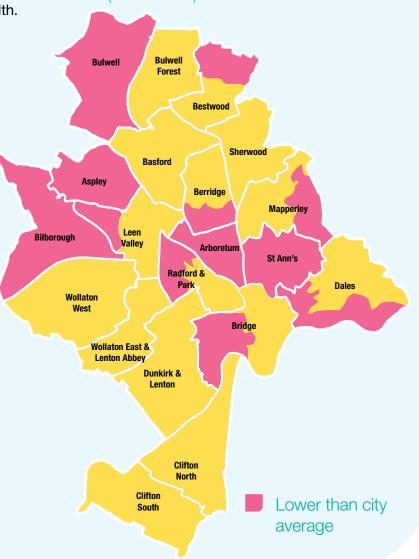
To increase healthy life expectancy in Nottingham and make us one of the healthiest big cities

We will compare our performance to that of the top four English Core Cities and aim to achieve the average of these for men and women. This would be the equivalent of both men and women in the city today living a further three years in good health.

To reduce inequalities in the city by improving the health of people in the neighbourhoods that have the worst healthy life expectancy

Figure 6 shows that there are a number of areas in Nottingham where the healthy life expectancy for men and women is significantly below the city average. We will prioritise work in these neighbourhoods to decrease the scale of inequalities in the city.

Figure 6: Neighbourhoods below the city average for Healthy Life Expectancy (2009-2013)



## Links to Other Strategies and Plans



For many of our priorities, there already exist local strategies with detailed action plans and governance arrangements. This strategy does not intend to repeat or duplicate those plans. Instead, the Health and Wellbeing Board will focus on the areas which will benefit from a partnership approach. The Board will have oversight of the key strategic actions, consider where it can add value and hold partners to account for delivery. There are a number of key strategies that link directly or work alongside this strategy.

## The Nottingham and Nottinghamshire Sustainability and Transformation Plan

NHS England, through its 'Five Year Forward View', set out the need to radically increase the emphasis on prevention in order to improve health and achieve a sustainable health and social care system. The Nottingham and Nottinghamshire Sustainability and Transformation Plan (STP) is our five-year plan setting out how local services will work together

to improve the quality of care, the health and wellbeing of our population and NHS finances. The plan is built upon the needs of the population and the priorities identified in the Health And Wellbeing strategy ensuring that the two are contributing to the same outcomes for citizens.

#### The Nottingham City Clinical Commissioning Group Strategy

This Strategy has been produced alongside the Nottingham City Clinical Commissioning Group's (CCG) Strategy. Both these strategies have the same aims of improving healthy life expectancy, reducing inequalities and empowering citizens to be able to better take care of their own health.

This strategy and the Health and Wellbeing Strategy shaped the development of STP. As such the local plans for Nottingham are crucial elements of how the STP will be delivered, particularly in relation improving the city's health through prevention (healthy lifestyles and healthy environment) and empowering citizens to better look after themselves and maintain independence through self-care (healthy culture).



#### The Carers' Strategy

Carers provide a massive contribution to maintaining the health and wellbeing of others in the city and we want to ensure that their value is recognised and does not come at a cost to their own health and happiness. More than one-in-ten people in the city are carers and a significant number provide in excess of 50 hours care per week25. Our aim is to improve the carer's quality of life by ensuring they receive early identification and holistic assessment of their needs, and by supporting them to realise their potential so that they can have a life outside caring. By providing effective support to improve carers' wellbeing and avoid carer breakdown, we will support vulnerable people and those with long-term conditions to continue to live as independently as possible in their own homes.

#### The Vulnerable Adults Plan

The Joint Health and Wellbeing Strategy is about improving the overall health and happiness of all city residents, but there are certain groups of adults who have more specific needs or who may be at an increased risk of poor health and wellbeing. In response, Nottingham City Council and Nottingham City CCG came together with other partners in the City (including those working in the voluntary sector) to develop the City's Vulnerable Adults Plan. Launched in 2012, the Vulnerable Adults Plan set out vision for how the city could work together to manage the challenges of the changing health and social care landscape and continue work to help vulnerable adults to live safer, happier, longer and more fulfilling lives, and to have more choice and control over their support and other aspects of how they live.

In this context, vulnerable adults are considered to be those in receipt of specialist health and social services, those who either have lost or who are at risk of losing their independence, and those at risk of social exclusion and harm<sup>26</sup>. Those areas of the Vulnerable Adults Plan 2016 - 2020 that the

Health and Wellbeing Board can add value to will be incorporated into this strategy.

#### Children and Young People's Plan

Nottingham Children's Partnership has had a Children and Young People's Plan since 2010 which covers all services for children, young people and their families. For young people leaving care, our responsibility extends beyond the age of 20. For those with learning difficulties it extends to the age of 25 to ensure the transition to adult services is properly planned and delivered.

The Plan is updated on an annual basis to ensure all new national and local policies and guidance relating to improving outcomes for children and young people are incorporated in a timely way and influence its delivery. The Plan brings together the children and young people's elements of our other partnership plans including the Nottingham Plan, the Education Improvement Board Strategic Plan: A Brighter Future for Nottingham Children and this newly-developed Health and Wellbeing Strategy: Healthier, Happier Lives; providing one shared framework for the Children's Partnership Board and their organisations to focus on.





## Summary: Our strategy on a page

Our vision	Nottingham will be a place where we all enjoy better health and wellbeing with a focus on improving the lives of those with the poorest outcomes the most.				
Our aims	To increase healthy life expectancy in Nottingham and make us one of the healthiest big cities  To reduce inequalities in health by targeting the neighbourhoods with the lowest levels of healthy life expectancy				
Our outcomes	Children and adults in Nottingham adopt and maintain Healthy Lifestyles	Children and adults in Nottingham will have positive Mental Wellbeing and those with long-term mental health problems will have good physical health	There will be a Healthy Culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill-health well	Nottingham's Environment will be sustainable; supporting and enabling its citizens to have good health and wellbeing	
Our priority actions	By 2020 Nottingham will be a city where children and adults will:  1 Be physically active to a level which benefits their health  2 Enjoy a healthy and nutritious diet  3 Be able to achieve and maintain a healthy weight  4 Be inspired to be smoke-free  Additionally,  5 People who drink alcohol will drink responsibly, minimising the harms to themselves and those around them  6 Young people and adults will choose to have safe sex reducing the risk of unwanted pregnancies and sexually transmitted infections	By 2020 Nottingham will be a city where:  1 Children and adults with, or at risk of, poor mental health will be able to access appropriate level of support as and when they need it  2 Those with long-term mental health problems will have healthier lives  3 Those with, or at risk of, poor mental health and wellbeing will be able to access and remain in employment  4 People who are, or at risk of, loneliness and isolation will be identified and supported	By 2020 Nottingham will be a city where:  1 Messages regarding health and wellbeing will be clear and consistent  2 Citizens will have knowledge of opportunities to live healthy lives and of services available within their communities  3 Individuals and groups will have the confidence to make healthy life choices and access services at the right time to benefit their health and wellbeing  4 Services will work better together through the continued integration of health and social care that is designed around the citizen, personalised and coordinated in collaboration with individuals, carers and families  5 We will reduce the harmful effects of debt and financial difficulty on health and wellbeing	By 2020 Nottingham will be a city where:  1 Housing will maximise the benefit and minimise the risk to health of Nottingham's citizens  2 The built environment will support citizens leading healthy lifestyles and minimise the risk of negative impact upon their wellbeing  3 Children and adults will be able to engage in active travel  4 Children and adults in Nottingham will have access to and use of green space to optimise their physical and mental wellbeing  5 Air pollution levels in Nottingham will be reduced	

Tackling Inequalities; Early Intervention; Sustainability; Engagement of the Voluntary and Community Sector; and Integrated Working

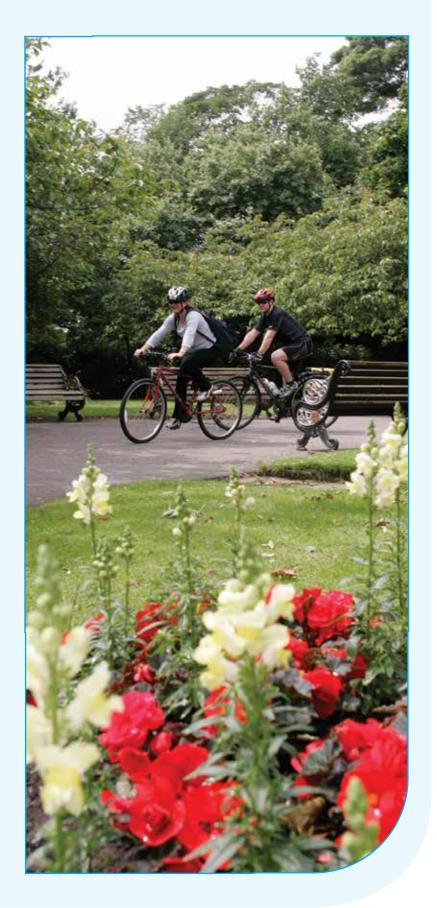


## Appendix

- 1 The full engagement results can be found here: www.nottinghamcity.gov.uk/hwb
- 2 The JSNA Evidence Summary can be found here: http://jsna.nottinghamcity. gov.uk/insight/Strategic-Framework/ Nottingham-JSNA/Related-documents/ **Executive-summary.aspx**
- 3 Based on 'Life expectancy at birth' which shows the average number of years a person would expect to live based on contemporary mortality rates. For a particular area and time period, it is an estimate of the average number of years a new born baby would survive if he or she experienced the age-specific mortality rates for that area and time period throughout his or her life.
- 4 Based on 'Healthy life expectancy at birth' which is a measure of the average number of years a person would expect to live in good health based on contemporary mortality rates and prevalence of selfreported good health.
- 5 Public Health England (2016) www.phoutcomes.info/search/life%20 expectancy#page/1/gid/1/pat/6/par/ E12000004/ati/102/are/E06000018
- 6 Barton and Green (2006)
- 7 Research shows that certain BAME groups are more likely to be affected by heart disease, diabetes, mental health issues and some types of cancer
- 8 Parks J et al. Morbidity and Mortality in people with Serious Mental Illness. 2006. See also: De Hert, M. et al. Physical illness in patients with severe mental disorders. World Psychiatry 2011;10:52-77.
- 9 Van der Kooy, K. et al. Depression and the risk for cardiovascular diseases: systematic review and meta analysis .International Journal of Geriatric Psychiatry, Volume 22, Issue 7, pages 613-626, July 2007.

- The detailed delivery plans can be found here: www.nottinghamcity.gov.uk/hwb
- According to Department of Health classifications and recommendations
- McManus S, et all. Adult Psychiatric 12 Morbidity in England, 2007: Results of a household survey.: NHS Information centre for health and social care. 2009
- 13 According to GP records there are round 20,000 people registered with depression and around 3,500 with severe mental health problems recorded on local GP registers for depression and severe mental health (2014 Quality and Outcomes Framework (QOF)
- 14 Hiroeh et al. Deaths from natural causes in people with mental illness Journal of Psychosomatic Research. Mar 2008 vol. 64(3) pp.275-83
- 15 Kessler R et al. Lifetime prevalence and age-of-onset distributions of mental disorders in the World Health Organization's World Mental Health Survey Initiative. World Psychiatry 2007. Available from www.ncbi. nlm.nih.gov/pmc/articles/PMC2174588/
- 16 Also know as Parity of esteem
- 17 Fair Society, Healthy Lives: The Marmot **Review (2010)**
- 18 FOE (2001) Pollution and poverty- Breaking the link.
- 19 Walking and Cycling, National Institute for Health and Care Excellence (NICE) Local Government Briefings (January 2013)
- 20 Porritt J, Colin-Thomé D, Coote A, Friel S, Kjellstrom T and Wilkinson P (2009) Sustainable development task group report: health impacts of climate change.
- 21 Marmot Review, London, 2010

- 22 'Healthy life expectancy' is based on applying data from the Annual Population Survey to birth and mortality rates by area ONS (2016)
- 23 In Nottingham, healthy life expectancy for males is 57.8 years and 58.4 years for females compared to a life expectancy of 77.1 years for males and 81.6 years for females (2012-2014 data, ONS 2016).
- 24 People in Nottingham will spend more of their life living in poor health than those living in other areas. In terms of the proportion of total life expectancy spent in a healthy state, the city is ranked 6th out of 8 for men amongst the England Core Cities and 7th for women (2012-2014 data, ONS 2015).
- 25 There are around 27,500 people in the city who care for another person and around 28% provide in excess of 50 hours care per week.
- 26 This would include those with alcohol and substance misuse issues, refugees and asylum seekers, those with a physical and sensory impairment, people with learning disabilities, carers, older people, those who are homeless or at risk of homelessness and those with mental health problems.





Thanks to our partners

















Nottingham University Hospitals NHS









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