Kensington and Chelsea Joint Health and Wellbeing Strategy 2016-21: Consultation Draft

Executive Summary

Introduction

Kensington & Chelsea is a small but densely populated borough situated in the heart of north-west London. It is a borough of contrasts being one of London's wealthiest boroughs but also containing areas of deprivation, particularly focused in the north. The Royal Borough is also home to some 18,000 businesses and as the home of London's 'Museum Quarter' the borough and showpieces like the Chelsea Flower Show and Notting Hill Carnival, attracts a large number of visitors annually. Most people in the Royal Borough consider their health to be good. Many residents are healthy and affluent and rates of life expectancy for men and women are among the highest in the country.

The Royal Borough at a glance:

- 158,700 residents and an average weekday daytime population of 280,000. The borough also has significant population 'churn' with annual flows in and out of the borough of approximately 13,000.
- Significant variation in wealth
- A very large working age population
- Diverse ethnicity with half of the borough's population born abroad
- Almost a quarter of children under 16 living in poverty
- Almost a third of state primary school age children who are overweight or obese
- Low rates of vaccination and immunisation coverage.
- Poor air quality and the 2nd highest carbon emissions in London
- High rates of people with serious and enduring mental illness
- A large proportion of one person households (47%) the highest in the country including a high proportion of lone pensioner households.
- High rates of smoking, alcohol use, poor diet and sexually transmitted infections and low levels of physical activity

Vision

Our vision is to enable everyone to: be as healthy as they can be and to start well, stay well and age well.

Our goal is to secure fast and wide ranging improvements to the health and well being of the people we serve and transform how our health and social care services are designed, delivered, used and how the need for them can be prevented as far as possible.

We are ambitious for the whole of the public, private and voluntary sectors to recognise the contribution they make to health and wellbeing, through jobs, housing and human relationships. And we want everyone in our community to have a valued role through work, volunteering or family, have a safe and secure living space and rewarding relationships with their loved ones

Priorities

Informed by a review of the Joint Strategic Needs Assessment and discussions with residents, patients and professionals, we have agreed four priority areas that we believe have the potential to make the biggest and fastest improvements to health and wellbeing in the borough over the next five years. They are:

1. Good mental health for all

Mental health disorders have a significant impact on the ability of people to lead fulfilling lives and contribute to society. Locally mental health is the most common reason for absence from work and the borough had the 2nd highest population with severe and enduring mental illness known to GPs in the country in 2013. People with mental health problems also face significant physical health problems and live significantly shorter lives as a result.

Action we will take includes:

- Make work a healthy place to be by promoting good workplace mental health and wellbeing and supporting people with mental illness into employment
- Promote better emotional and mental health and early intervention in schools
- Encourage awareness and improve the quality of local services and support for people living with dementia and their carers
- Work with staff in frontline services across the system to build skills and awareness of mental health
- Provide support for parents and parents-to-be for their own mental health and for the long-term mental health of their child
- Promote access to activities that promote wellbeing, volunteering and stronger social networking to improve outcomes for adults at risk of serious mental health conditions
- Provide early support for older people through effective information and advice and signposting to preventative/universal services
- Work with communities to help change attitudes and develop understanding of mental health.
- Work with professionals to break down the barriers between physical and mental health and ensure both are treated equally
- Improve the physical health and lifestyles of people with mental health conditions, with a particular focus on people with serious mental health conditions
- Improve access to children and young people's mental health services

2. Giving children, young people and families the best possible start

A child's early experiences have a huge impact on their long-term health and wellbeing. Compared to elsewhere, Kensington and Chelsea has poor rates of uptake for childhood immunisations, significant proportions of children living in poverty, high rates of child obesity and high rates of tooth decay in children under 5.

Action we will take includes:

- Develop an integrated health promotion offer for children and families focussed on breastfeeding and good nutrition, oral health, play and physical activity, immunisation and tobacco free homes
- Promote effective support for parents around sensitive parenting and attachment
- Support the development of strong communications and language skills in infancy.
- Provide evidence-based support for mothers, fathers and other carers to help prepare them for parenthood and improve their resilience when they have a new baby
- Strengthen the mental health support we provide to parents early on, including training key frontline staff to assess, support or refer families into relevant support services and ensure those needing specialist services receive them
- Support parents of children who are frequent users of primary and unscheduled care services to understand and manage minor illness and ailments at home, and when and how to access wider support.
- Ensure local services work together to minimise duplication and gain the best possible outcomes for families

3. Addressing the rising tide of long term conditions

Because of advances in care and treatment of long-term conditions (LTCs) like hypertension, cardiovascular disease and diabetes, people are living longer. But this care and treatment is consuming an ever greater proportion of resources. Care for LTCs presently accounts for 55% of GP appointments, 68% of outpatient and A&E appointments and 77% of inpatient bed days nationally. It is estimated that £7 out of every £10 spent on health and social care in England is associated with the treatment of people with one or more LTCs. Currently 15 million people are estimated to be living with one or more LTC in England and this is projected to increase to around 18 million by 2025.

Action we will take includes:

- Provide support and information for people to maintain healthy lifestyles
- Provide increased support for self-care and self-management of conditions
- Ensure continuity of care
- Ensure people's conditions are treated holistically by coordinated health and social care services
- Ensure there is 'no wrong door' and effective signposting to health and social care services
- Ensure people their carers and families are involved in decisions about their own care
- Provide support for carers and their families to ensure they are able to support care receivers effectively

4. Delivering a high quality and sustainable health and social care system

We know that the current system of health and care can be confusing for patients, families and carers. And as our population gets older and more people develop long-term conditions our system is becoming less able to cope with the changing needs and expectations of the people we serve. Our current health and care system is unsustainable. We spend too much on services which respond at the point of crisis and not enough on early intervention and preventative support that keeps people well.

Action we will take includes:

- working together across organisational boundaries to plan and deliver the workforce needed for the future;
- encouraging and enabling communities to take greater care of themselves and others;
- developing the buildings and infrastructure required to support a system that is sustainable and fit for the future;
- using technology to join up the health and care system and support people to better look after themselves;
- using finance as a way to enable closer working and commissioning between health and social care and more personalised, integrated and person centred services.

Principles

To achieve our vision and deliver our priorities we know we must also deliver change in a number of different areas. That is why we have developed a set of supporting principles that will underpin our work for the next five years. These principles describe the way we will approach our work including our four priority areas. Our principles are:

- **Prioritising prevention**: we will support people who are mostly healthy with the information and tools they need to stay well and maintain healthy lifestyles
- Enabling independence, community resilience and self-care: we will promote and
 encourage our communities to be more actively involved in their own health and
 wellbeing and enable everyone to take a greater role in the management and
 maintenance of their health and care conditions, and the health and care conditions of
 others wherever appropriate
- Tackling the wider determinants of health: we will work to ensure that the environment into which people are born, grow, live, work and age supports them to stay well and make healthy choices
- Making community, primary care and social care an effective front line of local care: we will work to ensure the right support is provided closer to home enabling people to stay well in their homes and communities.
- **Delivering integration and service reform**: we will work to ensure that when people do need to access health and care services that those services are joined up around their needs and the needs of family members and carers.

