

# Swindon's Health and Wellbeing Strategy 2013 - 2016



Swindon's Health and Wellbeing Board

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# Forward

Swindon is a vibrant and growing town and one where I believe everyone should have the opportunity to live healthy, safe, fulfilling and independent lives supported by thriving and connected communities.

To achieve this we have come together as the Swindon Health and Wellbeing Board, a partnership established to ensure an integrated and collaborative approach to health and social care across Swindon. Working with local stakeholders including service users, patients and carers, the voluntary and community sector, NHS, local authority and One Swindon partners, we have developed the first Health and Wellbeing Strategy for Swindon.

This strategy outlines a three year ambition for improving health and addressing health inequalities across the borough. It identifies priorities and approaches for partners including the Clinical Commissioning Group (CCG), NHS and local authority, to take into account when developing their own plans and making decisions about spending money and planning services over the next few years.

There is already a strong culture of working together to achieve better health and wellbeing in Swindon which has led to the reduction of early mortality and increased life expectancy.

We will continue this great work to ensure that people have access to high quality health and social care services, to promote earlier intervention and further integration across health, social care and wider services. We will also recognise the importance of other factors such as education, housing, employment, community networks and access to a wide range of leisure and cultural activities.

Health is fundamental to every aspect of a person's life and is a crucial factor in a child's development. Public health interventions, for example those that reduce smoking prevalence, obesity and alcohol and drug misuse, can have long lasting positive impacts on the health and wellbeing of individuals over a whole lifetime.

Increasing the opportunities for children and adults to enjoy healthy, safe and fulfilling lives is our collective ambition and this strategy will focus our energies in pursuit of that ambition.



*Cllr. David Renard,  
Leader of Swindon Borough Council*

# Swindon's Health and Wellbeing Strategy



## Introduction

**Leaders from across the community have come together to form Swindon's Health and Wellbeing Board. The focus of the board is on improving health and wellbeing so that individuals and communities are able to live healthier lives, and to ensure that everyone in Swindon has a positive experience of the health and care system.**

Health and wellbeing is more than the absence of disease; it is the ability for everyone to fulfil their potential, make a contribution and to be resilient to life's challenges. With that in mind, we have adopted the approach that health and wellbeing is the ability to adapt and to self-manage in the face of social, physical, and emotional challenges and to function with fulfilment and a feeling of wellbeing.

The Health and Social Care Act 2012 places health and wellbeing boards at the centre of planning to transform health and social care and achieve better population health and wellbeing. Health and wellbeing boards have been given a number

of core responsibilities. These include assessing the health and wellbeing needs of the local population through the Joint Strategic Needs Assessment (JSNA) and preparing a Health and Wellbeing Strategy.

The Shadow Health and Wellbeing Board commissioned a health and wellbeing strategy steering group in 2012 with representation from the Swindon LINK, the Clinical Commissioning Group, Swindon Borough Council, NHS Swindon and Public Health to develop the strategy. This process has included a series of discussions and workshops, engaging with a wider stakeholder audience, to identify and agree our local priorities.

This is the first Health and Wellbeing Strategy for Swindon and sets out the vision and the long term improvements in local people's health and wellbeing that we want to achieve in Swindon. It also sets out our priorities for action and indicators that will help us measure progress. (See Appendix one for a summary table). The strategy will be monitored and reviewed by the Swindon Health and Wellbeing Board and revised annually informed by and reflecting the latest JSNA findings.

## Vision for health and wellbeing in Swindon

Everyone in Swindon lives a healthy, safe, fulfilling and independent life and is supported by thriving and connected communities.

The aim is to improve health and wellbeing outcomes especially for those communities and groups who experience the poorest health. Health and wellbeing in Swindon is improving and we must make sure that it continues to improve. We believe by working together we can make significant differences to everyone's health and wellbeing.

This strategy comes at a time of huge challenges for Swindon from:

- An ageing population.
- A growing burden of lifestyle related ill-health, particularly due to physical inactivity, obesity, alcohol misuse and smoking.
- A growing need for savings across the public sector finances, including health and social care services.
- Significantly poorer health in our most disadvantaged communities.

There is also great opportunity in Swindon by building on the existing community capacity that exists. Making better use of community assets in an 'asset based approach' values and uses the capacity, skills, knowledge and connections and potential that already exists within our local community. Swindon has a number of vibrant voluntary and community sector organisations which make an invaluable contribution to both the life of the local communities and the lives of individuals.

This strategy sets the context for other health and wellbeing plans and for commissioning of integrated NHS, public health, social care and related children's services. The Health and Wellbeing Board will work with all partners to help align policies, services, resources and activities with the Health and Wellbeing Strategy and to ensure

joined up action to tackle issues that will benefit from multi agency working.

The Health and Wellbeing Board will expect that the commissioning plans of the Local Authority, the Police and Crime Commissioner, the Clinical Commissioning Group and the local NHS are consistent with the Strategy, as required by the Health and Social Care Act 2012.

## Purpose of the strategy

**The Joint Strategic Needs Assessment provides the evidence which tells commissioners in health and social care what the needs of local communities are. The Health and Wellbeing Strategy puts the evidence and the vision into practice by providing high level priorities from which health and social care services will be purchased and commissioned through joint and collective action.**

“ Everyone in Swindon has to play their part if we are to succeed ”

The Health and Wellbeing Strategy for Swindon is aligned with the Swindon Sustainable Community Strategy and the One Swindon framework to deliver our health and wellbeing vision. It focuses on the health and social care issues for everyone living in Swindon, but also recognises the wider factors that affect health and wellbeing including education, employment, housing and leisure activities, all of which are under pinned by other more detailed strategies and plans.

To achieve our vision we must continue to work together across organisations and alongside our community, building on strengths of our communities, to improve the quality of life and wellbeing for all. Everyone in Swindon has to play their part if we are to succeed. The vision is about improving the experience of people throughout their lives in terms of health and wellbeing, enabling individuals to make positive choices to lead healthier lifestyles and about reducing inequalities.

## The purpose of this strategy is to:

- Set out the vision of what we want to achieve for health and wellbeing in Swindon
- Identify the key priorities for improving health and wellbeing
- Drive and influence the delivery of health care
- Provide an integrated framework that aligns with other local strategies
- Improve health and wellbeing for everyone and reduce health inequalities
- Maximise the opportunities local assets afford us
- Engage with local partners and communities to ensure local needs are being met

## Wider determinants of health

The wider determinants of health encompass other aspects of life such as employment, housing, education, crime and access to services. A person's health is determined by a whole range of things including these wider determinants of health and factors such as their age and gender through to lifestyle factors and social and community networks. Some of these factors individuals can control others they cannot and it is the interaction between these various factors that can impact on health and wellbeing and lead to health inequalities. It is therefore essential that links are made to other partnership plans and strategies that impact upon the wider determinants of health such as the Police and Crime Plan, the Local Transport Plan, The Housing Strategy, The Economic Strategy and the One Swindon Plan.

We can see evidence of health inequalities across Swindon when we compare the life expectancy of people who live in our least deprived communities with those that live in our less affluent areas. In men we see nearly nine years difference in life expectancy between those living in our least deprived communities compared with those that live in our less affluent areas and in women it is six and a half years. The challenge for Swindon is to empower people of all ages to live healthy active lives and to reduce the health inequalities that exist across the town.

## Swindon's priorities

**The strategy builds on a number of collaborative pieces of work undertaken in Swindon with a wide range of stakeholders that focus on working together to improve people's health and wellbeing in Swindon (One Swindon, The Swindon Sustainable Communities Strategy – A Shared Vision for Swindon 2008 -2030). In developing this**

strategy five high level outcomes for Swindon have been identified. The health and wellbeing priorities have been determined by the Health and Wellbeing Board based on a set of criteria (Appendix two). Work done to agree these priorities drew upon evidence from the Swindon Joint Strategic Needs Assessment (JSNA) and following engagement with local communities, organisations and other groups who work in the area of health and wellbeing.

### Outcomes:

1. Every child and young person in Swindon has a healthy start in life
2. Adults and older people in Swindon are living healthier and more independent lives
3. Improved health outcomes for disadvantaged and vulnerable communities (including adults with long term conditions, learning disabilities, physical disabilities or mental health problems, offenders)
4. Improved mental health, wellbeing and resilience for all
5. Creation of sustainable environments in which communities can flourish

### Measuring progress

The Health and Wellbeing Board is responsible and accountable for the Health and Wellbeing Strategy and has a critical leadership role to ensure the achievement of the outcomes. The national outcomes frameworks for Adult Social Care, the NHS and Public Health have provided the overarching framework for the Health and Wellbeing Strategy. A number of relevant indicators from these frameworks have been chosen against each of the outcomes which will help us to measure our progress. The Health and Wellbeing Board will review the strategy and progress against the priorities on an annual basis.



## OUTCOME 1

# Every child and young person in Swindon has a healthy start in life.

All children and young people in Swindon deserve the best start in life and we want them to enjoy life, establish healthy relationships, achieve, stay safe from harm, be healthy and grow up to reach their full potential making a positive contribution to society. We know that health in later life is strongly influenced by childhood experiences and focusing now on improving their emotional wellbeing and ensuring that they have the best opportunities early in life will not only improve their individual health but also that of the whole family. To have an impact on reducing health inequalities we need to address child poverty, children's access to positive early experiences, and support children and young people to take part in positive activities appropriate for their age. Helping our young people to prepare, from an early age, to be self-sufficient and develop a network of support will enable them to live independent and healthy lives and reduce negative risk taking behaviours such as smoking, drinking alcohol, self harm and underage sex.

Focussing on pregnancy and the first few years of a child's life (especially those who are more disadvantaged and vulnerable) will ensure that every child is given the best possible start in life and benefit them for the rest of their lives. We will review and build on our services using an evidence based approach to target early intervention, smooth transitions (especially for disabled children) and preventative programmes that will ensure our young people have the best start in life and prepare them for adulthood.



“ We know that health in later life is strongly influenced by childhood experiences ”



### The local issues

- GCSE attainment has risen over the years with just under 53% achieving 5 or more A\*- C grades at GCSE or equivalent including English and maths in 2011/12 (England average is 59%)
- The number of young people who are not in education, employment or training is high
- Over 7,300 children aged 0-15 were known to be living in poverty 2010
- Alcohol specific admission rates for under 18 year olds are higher than the national average
- Nearly 13% of pregnant women continue to smoke throughout their pregnancy (England average 19%)
- Over 35% of 10 to 11 year olds in Swindon are overweight and obese (England average 34%)
- Nearly 50% of women stop breastfeeding at the 6 to 8 week stage - Swindon has one of the highest drop off rates in the country for breastfeeding
- High rates of hospital admissions for self-harm amongst children under 18 years old.
- Younger children have high support needs indicated by the high numbers of children in need and the small increase seen in children coming into care due to neglect
- 370 families with complex needs live in Swindon
- Children in local authority care are more at risk of having poor emotional health and wellbeing
- In 90% of domestic violence incidents a child or young person will be in the house or directly witness the incident
- High rates of first time entrants into the youth justice system for 10 -17 year olds.

### Our Priorities

1. Improve the mental wellbeing of children and young people
2. Reduce risky behaviours amongst our children and young people such as smoking, drinking, self-harm
3. Keep all children and young people safe
4. Improve educational attainment of our children and young people
5. Reduce the number of young people not in education, employment or training

### Indicators for success

- ✓ Prevalence of breastfeeding at 6-8 weeks from birth
- ✓ Percentage of children gaining five good GCSE's including maths and English
- ✓ Alcohol specific hospital admission rates for under 18's
- ✓ Self-harm hospital admission rates for under 18's
- ✓ Percentage of mothers smoking at time of delivery
- ✓ Levels of overweight or obese 10-11 year olds
- ✓ 16-18 year olds not in education, employment or training
- ✓ Infant mortality
- ✓ Childhood vaccination coverage
- ✓ Children with second or subsequent child protection plans
- ✓ The number of children in care
- ✓ Emotional wellbeing of looked after children
- ✓ First time entrants to the youth justice system

## OUTCOME 2

### Adults and older people in Swindon are living healthier and more independent lives.

More people in Swindon are living longer. Premature (early) deaths from heart disease, stroke and cancer are reducing and a greater emphasis on prevention would ensure that this reduction continues.

Many people will have long term health conditions such as diabetes or heart disease in middle age, but there is scope to prevent ill health and disability in people - early action would improve their quality of life and slow down the future growth in health and social care requirements in later life. Everyone has a role to improve their health and wellbeing and that of their families and to take responsibility for their own health and wellbeing. Lifestyle choices can have a direct impact on health and wellbeing and changing behaviours such as stopping smoking, eating and drinking more healthily and being more physically active can prevent the onset of some diseases and prevent premature death from diseases such as cancer and heart disease.



The age structure of our local population means that Swindon will see a significant increase in the number of older people in the future. Older people make a valuable contribution to the communities across Swindon and it is important to support, expand and grow this asset ensuring that older people with energy, skills and time to give play a role and contribute to their local community.

Our population is broadly healthier than the England average and yet a higher proportion go to hospital, with hospital stays resulting in a breakdown in self-care and personal coping strategies leading to increases in long term health and social care support from a number of different services.

We need to ensure an integrated service provision that works together and focuses on regaining and promoting independence working with local communities and social networks to help people remain in their own home for as long as possible.

“Lifestyle choices can have a direct impact on health and wellbeing”

We want to enable people to stay independent and safe and enjoying the best possible quality of life. This priority sets out our aim to improve the quality of life and not just extend life. It recognises the need to improve the wellbeing of people with caring responsibilities in and around Swindon, creating a community where carers are recognised, valued and supported. It also acknowledges that when people are at the end of their lives they and their carers are supported in making choices about where they would like to die.



“We want to enable people to stay independent and safe and enjoying the best possible quality of life”

#### The local issues

- Average male and female life expectancy has increased over the years and is just over 79 years for men and nearly 83 years for women, similar to the England average
- Projections show an expected population increase with the majority of that growth in the over 65 age group
- Smoking is the single biggest contributor to shorter life expectancy and over 21% of adults continue to smoke in Swindon (England average 20%)
- Rates of hospital admissions for alcohol related harm have risen over time.
- Over 2,000 people over 65 years old are estimated to have dementia in Swindon and this is expected to increase by about 700 by 2020
- Approximately 6.5% of adults in Swindon have diabetes and this is estimated to rise to over 8% by 2030.
- An estimated 27% of our adult population in Swindon are obese
- Nearly one third (32.7%) of our adult population are considered inactive (England average 28.5%)
- The number of avoidable excess winter deaths continues to rise each year

#### Our Priorities

1. **Strengthen integrated working between health and social care**
2. **Reduce the number of people suffering from long term conditions through the promotion of healthy lifestyle choices**
3. **Promote independence and reduce the need for hospital services and long term care**
4. **Ensure that carers needs are met**

#### Indicators for success

- ✓ New admissions of older people (over 65) into residential and nursing care
- ✓ Take up of the NHS Health Check programme by the eligible population
- ✓ Smoking prevalence rate for adults
- ✓ Hospital admissions for alcohol related harm
- ✓ Rates of early death (under 75's) from
  - o cardio vascular disease (including heart disease and stroke),
  - o cancer
  - o respiratory disease.
- ✓ Carers who have their needs assessed
- ✓ Proportion of physically active adults
- ✓ Seasonal flu vaccination rates



## OUTCOME 3

### Improved health outcomes for disadvantaged and vulnerable communities (including adults with long term conditions, learning disabilities, physical disabilities or mental health problems, offenders).



There is a strong link between poverty and health; the poorer you are the healthier you are likely to be. This is caused by many things, including differences in housing conditions, diet, levels of smoking and drinking, access to sport and leisure, social support networks as well as barriers to accessing healthcare (such as language and literacy barriers).

We experience significant differences in life expectancy in Swindon between people living in our more affluent areas compared to those living in our less affluent areas. We also know that some of our more vulnerable communities (including the homeless, those with learning disabilities, mental health issues, victims of

violent and domestic crime, offenders and those from our black and minority ethnic communities) will experience poorer health outcomes and that they are less likely to access health services.

Focusing on prevention and early detection of the conditions most strongly related to health inequalities such as cardio vascular disease, cancer, respiratory disease and diabetes will help to reduce the gap in life expectancy that we have in Swindon. It is important to prevent people becoming ill and developing these long term conditions. We can do this by addressing some key lifestyle factors which we know are more prevalent in the less affluent areas of Swindon as well as addressing the wider determinants of health (housing, educational attainment, employment).

“ It is important to prevent people becoming ill and developing these long term conditions ”



“ There is a strong link between poverty and health ”

### The local issues

- People who live in our least deprived communities live, on average, 8 years longer than those living in our most deprived.
- In 2009 a total of 14.3% of the borough's resident population belonged to black and minority ethnic (BME) communities
- 11% of Swindon school pupils have English as a second language (up from 7% in 2010), with a total of 104 languages being spoken
- People living in the most deprived areas of Swindon were almost four times as likely to be admitted to hospital for alcohol-specific reasons than people living in the least deprived areas
- There are between 3,600 to 3,800 adults with learning disabilities in Swindon and Swindon has a low proportion of adults with learning disabilities who live in their own home or with their family
- Smoking rates in some of our more deprived communities are more than double the average rate for Swindon

### Our Priorities

1. Ensure access to information and advice that supports choice and control
2. Ensure people from disadvantaged groups receive good quality care for their physical health
3. Local economic and social policies are developed to strive to narrow social inequalities rather than widen them
4. Prevent early death and disease through healthier lifestyle choices, early detection and screening

### Indicators for success

- ✓ New admissions for people with learning disability into residential care
- ✓ Gap in the employment rate between those with a learning disability and the overall employment rate
- ✓ People receiving social care who say they have advice and information
- ✓ Proportion of people feeling supported to manage their condition
- ✓ The proportion of people who use services who feel safe
- ✓ Cancer screening coverage
- ✓ Life expectancy rates



## OUTCOME 4

### Improved mental health, wellbeing and resilience for all.

We want everyone in Swindon to enjoy the best possible mental health and wellbeing and have a good quality of life. This would mean that everyone has a greater ability to manage their own lives, a sense of belonging within their communities, the skills they need for living and working and a greater sense of purpose. Good mental health is fundamental to physical health, relationships, education and training, employment and to fulfilling ones potential. Mental health problems such as depression are more common in people with physical illness and having both physical and mental health problems will impact upon recovery from both. We know that people with poor mental wellbeing are more likely to smoke, drink unhealthily, be obese, eat unhealthily and be less physically active - all of which contribute to their physical health and longer term health outcomes.

Effective collaboration between many agencies is vital to ensure that a wide range of community resources are available to promote recovery, dispel the stigma and discrimination around mental health and support and sign post people appropriately.

Developing sustainable, cohesive and connected communities also has an important role in promoting good mental health. There is evidence that strong social networks help protect people against physical and mental health stress. Having safe places for children to engage in positive activities, reducing crime, reoffending and anti social behaviour, supporting people to reduce their dependencies on substance misuse, tackling domestic violence, reducing loneliness and social isolation all contribute to developing safer and supporting communities.

“ This would mean that everyone has a greater ability to manage their own lives ”



“ There is evidence that strong social networks help protect people against physical and mental health stress ”



#### The local issues

- At least one in four people will experience a mental health problem at some point in their life
- An estimated 29,000 people in Swindon have a common mental health disorder
- There was, on average, over 315 hospital admissions a year for self-harm of Swindon people aged 15+ between 2001/02 and 2008/09
- An average of 16 Swindon residents a year died of suicide or undetermined causes from 2001 to 2009, with three quarters of these being men
- There are strong links with deprivation and social fragmentation for both suicide and self-harm
- There are estimated to be over 530 injecting drug users in Swindon
- There were 825 individuals reporting to Swindon probation office (Jan/Feb 2013)

#### Our Priorities

1. **Develop effective pathways for people with mental health problems**
2. **Increase the opportunities for people with mental health problems to access support services and community facilities aimed at promoting recovery (including education, debt management, housing, leisure services, health promotion)**
3. **Promote positive mental health and recognise that mental health is everyone's business**
4. **Reduce the stigma and discrimination associated with mental ill health**

#### Indicators for success

- ✓ First time entrants to the youth justice system
- ✓ Successful completion of drug treatment
- ✓ Suicide rate
- ✓ Self reported wellbeing
- ✓ Repeat incidences of domestic violence



## OUTCOME 5

### Creation of sustainable environments in which communities can flourish.

We will focus on developing communities that have a positive impact on the way people live and how they feel about their neighbourhood. We know that well connected and vibrant communities provide a resilient and supportive local environment.

It is important to appreciate and mobilise individual and community talents, skills and assets and not just focus on problems and needs. This helps to empower communities to use their own resources and skills and helps combat the idea that people are passive recipients of services.

Community assets are more than just the physical assets such as parks, leisure facilities, open spaces but are also the skills of local residents, the power of local associations and the supportive functions of local institutions. Local assets can be considered to be the primary building blocks of sustainable community development and as such have a vital contribution to make to the health and wellbeing of the community. Drawing upon existing community strengths will ensure the building of stronger more sustainable communities for the future.

It is recognised that transport, green spaces and the built environment play a key role in determining our health and wellbeing as does feeling safe and free from the fear of crime. Sustainable communities are places in which people want and are able to live and work, now and in the future. They meet the diverse needs of existing and future residents, are sensitive to their environment and contribute to a high quality of life. They are safe and inclusive, well planned, built and run, offering equality of opportunity and good services for all.



“ Community assets are more than just the physical assets ”



“ green spaces and the built environment play a key role ”

#### Our Priorities

1. **Build on the strengths of local communities, including the local voluntary sector, to enhance social cohesion and promote social inclusion of marginalised groups and individuals.**
2. **Work with our local communities to develop creative solutions for local issues**
3. **Ensure that housing and development strategies for new and existing communities identify the health and wellbeing impacts for residents in the short and long term**
4. **Promote the use of green, open spaces and activities such as walking and cycling**
5. **Promote effective public transport and transport networks which ensure access to services and activities and encourage permeability within communities**

#### Indicators for success

- ✓ Utilisation of green spaces
- ✓ Self reported wellbeing
- ✓ Adult social care service users feel they have the amount of social contact they want
- ✓ Volunteering levels
- ✓ Offending and anti-social behaviour rates

#### Reviewing Progress

We will monitor local progress against the range of indicators identified for each of the priorities and link with other key strategies to see we are making a difference. Successful implementation of this strategy will require a partnership approach enabling Health and Wellbeing Board members to hold their respective organisations and each other to account across service planning, commissioning and service delivery.

The strategy will be monitored and reviewed by the Swindon Health and Wellbeing Board and revised annually informed by and reflecting the latest JSNA findings.

## Appendix one Strategy summary

<b>Vision</b> Everyone in Swindon lives a healthy, safe, fulfilling and independent life and is supported by thriving and connected communities		
Outcomes	Our Priorities	Indicators for success
<b>1. Every child and young person in Swindon has a healthy start in life</b>	<ol style="list-style-type: none"> <li>1. Improve the mental wellbeing of children and young people</li> <li>2. Reduce risky behaviours amongst our children and young people such as smoking, drinking and self harm</li> <li>3. Keep all children and young people safe</li> <li>4. Improve educational attainment of children and young people</li> <li>5. Reduce the number of young people not in education, employment or training</li> </ol>	Prevalence of breastfeeding at 6-8 weeks from birth; Percentage of children gaining five good GCSE's including maths and English; Alcohol specific hospital admission rates for under 18's; Self-harm hospital admission rates for under 18's; Percentage of mothers smoking at time of delivery; Levels of overweight or obese 10-11 year olds; 16-18 year olds not in education, employment or training; Infant mortality; Childhood vaccination coverage; Children with second or subsequent child protection plans; The number of children in care; Emotional wellbeing of looked after children; First time entrants to the youth justice system
<b>2. Adults and older people in Swindon are living healthier and more independent lives</b>	<ol style="list-style-type: none"> <li>1. Strengthen integrated working between health and social care</li> <li>2. Reduce the number of people suffering from long term conditions through the promotion of healthy lifestyle choices</li> <li>3. Promote independence and reduce the need for hospital services and long term care</li> <li>4. Ensure that carers needs are met</li> </ol>	New admissions of older people (over 65) into residential and nursing care; Take up of the NHS Health Check programme by the eligible population; Smoking prevalence rate for adults; Hospital admissions for alcohol related harm; Rates of early death (under 75's) from; cardio vascular disease (including heart disease and stroke); cancer; respiratory disease; Carers who have their needs assessed; Proportion of physically active adults; Seasonal flu vaccination rates
<b>3. Improved health outcomes for disadvantaged and vulnerable communities</b>	<ol style="list-style-type: none"> <li>1. Ensure access to information and advice that supports choice and control</li> <li>2. Ensure people from disadvantaged groups receive good quality care for their physical health</li> <li>3. Local economic and social policies are developed to strive to narrow social inequalities rather than widen them</li> <li>4. Prevent early death and disease through healthier lifestyle choices, early detection and screening</li> </ol>	New admissions for people with learning disability into residential care; Gap in the employment rate between those with a learning disability and the overall employment rate; People receiving social care who say they have advice and information; Proportion of people feeling supported to manage their condition; The proportion of people who use services who feel safe; Cancer screening coverage; Life expectancy rates
<b>4. Improved mental health, wellbeing and resilience for all</b>	<ol style="list-style-type: none"> <li>1. Develop effective pathways for people with mental health problems</li> <li>2. Increase the opportunities for people with mental health problems to access support services and community facilities aimed at promoting recovery (including education, debt management, housing, leisure services, health promotion)</li> <li>3. Promote positive mental health and recognise that mental health is everyone's business</li> <li>4. Reduce the stigma and discrimination associated with mental ill health</li> </ol>	First time entrants to the youth justice system; Successful completion of drug treatment; Suicide rate; Self reported wellbeing; Repeat incidences of domestic violence
<b>5. Creation of sustainable environments in which communities can flourish</b>	<ol style="list-style-type: none"> <li>1. Build on the strengths of local communities, including the local voluntary sector, to enhance social cohesion and promote social inclusion of marginalised groups and individuals.</li> <li>2. Work with our local communities to develop creative solutions for local issues.</li> <li>3. Ensure that housing and development strategies for new and existing communities identify the health and wellbeing impacts for residents in the short and long term</li> <li>4. Promote the use of green, open spaces and activities such as walking and cycling</li> <li>5. Promote effective public transport and transport networks which ensure access to services and activities and encourage permeability within communities</li> </ol>	Utilisation of green spaces: Self reported wellbeing; Adult social care service users feel they have the amount of social contact they want; Volunteering levels; Offending and anti-social behaviour rates

Key supporting local strategies and plans include: The Swindon Sustainable Community Strategy. One Swindon. The Local Plan (formerly The Swindon Core Strategy). Community Safety Partnership Business Plan. Healthy Weight Strategy. Active Swindon Strategy. The Swindon Tobacco Control Plan. Children and Young People's Early Support Strategy. Local transport Plan 3. Alcohol Strategy. Mental Health Promotion Strategy. End of Life Strategy. Swindon Clinical Commissioning Group Commissioning Intentions. Domestic Violence Strategy. Swindon Borough Council Corporate Strategy. Wiltshire and Swindon Police and Crime Plan.



## Appendix two Criteria for prioritisation

### The priorities outlined in this Health and Wellbeing Strategy have been chosen because they:

- deliver the most benefit to our population
- impact upon health inequalities
- have the potential to improve health and wellbeing
- affect a large number of people across all age ranges
- require strong leadership and coordinated action across organisations and our communities in order to secure change
- are informed and based on evidence identified by our JSNA and the views of stakeholders

## References

### Swindon Community Strategy

[http://www.talkswindon.org/politics/leaflet\\_archive/2008%2001%2001%20Rod%20Bluh%20-%20Vision%20For%20Swindon\\_2008-2030.pdf](http://www.talkswindon.org/politics/leaflet_archive/2008%2001%2001%20Rod%20Bluh%20-%20Vision%20For%20Swindon_2008-2030.pdf)

### Swindon Joint Strategic Needs Assessment

<http://www.swindon.gov.uk/healthandwellbeing>

### Public Health Outcomes Framework

<https://www.gov.uk/government/publications/healthy-lives-healthy-people-improving-outcomes-and-supporting-transparency>

### Adult Social Care Outcomes Framework

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/141627/The-Adult-Social-Care-Outcomes-Framework-2013-14.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/141627/The-Adult-Social-Care-Outcomes-Framework-2013-14.pdf)

### NHS Outcomes Framework

<https://www.gov.uk/government/publications/nhs-outcomes-framework-2013-to-2014>

### One Swindon

<http://www.oneswindon.org.uk/Pages/Home.aspx>

### Wiltshire and Swindon Police and Crime Plan 2013 - 2017

<http://www.wiltshire-pcc.gov.uk/Document-Library/Police-and-Crime-Plan/PCC-Police-and-Crime-Plan.pdf>





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