

Agenda Item 42.

TITLE **Health and Wellbeing Strategy**

FOR CONSIDERATION BY Health and Wellbeing Board on Thursday, 8 November 2018

WARD None Specific;

DIRECTOR/ KEY OFFICER Charlotte Seymour, Project Support Officer

Health and Wellbeing Strategy priority/priorities most progressed through the report	This will cover all three of the prospective priorities.
Key outcomes achieved against the Strategy priority/priorities	It <i>is</i> the strategy.

Reason for consideration by Health and Wellbeing Board	Production and publication of the joint health and wellbeing strategy is one of the mandated duties of the Health and Wellbeing Board.
What (if any) public engagement has been carried out?	None to date. The Board may decide carry out some engagement with this Strategy.
State the financial implications of the decision	None.

RECOMMENDATION

That:

- 1) the focused Joint Strategic Needs Assessment chapters attached as Appendix 2 be approved;
- 2) the Health and Wellbeing Board (HWB) review and support the refreshed strategy and accompanying focused Joint Strategic Needs Assessment (JSNA) chapters and recommend its approval to Council.
- 3) the Board considers how to engage with wider partners on delivery of actions to achieve the strategy.

SUMMARY OF REPORT

The proposed Joint Health and Wellbeing Strategy has 3 priorities: creating physically active communities, reducing social isolation and loneliness and narrowing the health

inequalities gap. For each of these priorities a focused JSNA chapter has been produced. The key findings are:

Creating physically active communities:

- Only 16% of teenagers achieve the recommended physical activity level of one hour of moderate to physical activity every day.
- In 2016/17, 71% of adults aged 19 and over in Wokingham achieved at least 150 minutes of physical activity per week in accordance with the recommended guidelines. This was significantly better than the England figure of 66% and similar to the other least deprivation authorities (70%).
- On 27/10/2017, 8,350 patients in Wokingham CCG were on the GP Obesity Register. This was 6.6% of the population aged 18 or over, which was lower than the comparator CCG Group but significantly lower than the national figure of 9.7%. We know that obesity is seriously under-reported by GPs.
- Wokingham's Local Transport Plan aims to achieve 60% of all pupils traveling to school by walking or cycling by 2026 and to improve cycle parking by schools.
- The Reception year (aged 4-5) prevalence of overweight (including obese) children in Wokingham for 2016/17 was nearly a fifth (18%).
- The year 6 (aged 10-11) prevalence of overweight (including obese) children in Wokingham for 2016/17 was 26.6%.

Reducing social isolation and loneliness:

- Living alone is strongly associated with social isolation. The estimated number of elderly population living alone in Wokingham borough is 10,442. This number is estimated to increase by 25% by 2025.
- Adults who are users of social care can be quite socially isolated; less than half (48%) had as much social contact as they wanted.
- Adults who provide unpaid care to friends and relatives are also at risk of isolation. Just over a third (36%) of adult carers who had as much social contact as they wanted.
- 7.3% of children and young people in Wokingham are estimated to have a diagnosable mental health disorder. This would equate to 1828 children and young people.
- There are around 443 children and 465 adults in Wokingham who need support for learning disabilities. It's estimated that 85% of young disabled adults from the 18-34 year old age group feel lonely. (Scope, 2017).
- Over 1 in 10 mothers are thought to be affected by post-natal depression which can be exacerbated by social isolation. It is estimated that around 300 mothers in Wokingham are affected each year.

Narrowing the health inequalities gap:

- Wokingham is the least deprived Borough in Berkshire and is the 2nd least deprived out of 326 local authorities in the country – but inequalities still exist!
- Men among the most deprived 10% of the Borough can expect to live an average of 4.5 fewer years than the least deprived and over 7 fewer years in full health. For women the gap is wider at 5.5 years.
- As well as the deprivation gap, inequalities in health outcomes also exist according to ethnicity, age, gender and sexual identity, disability and mental health.
- Health in pregnancy and early years is generally good, however, only half of children receiving free school meals are 'ready for school' aged five compared with over three quarters of their peers.

- Wokingham’s average KS4 results (GCSE equivalent) are among the top 10% in the country, however, young people receiving free school meals are scoring almost 40% lower than their peers.
- Despite one of the lowest rates of smoking in the country, routine and manual workers are twice as likely to smoke as those in other occupation groups.
- Compared with other local authorities in the South East employment rates across all sectors in society are good in, however, big gaps in employment remain for the most vulnerable in society.
- Availability and affordability of housing in Wokingham is a challenge. In winter heating costs are a significant burden for the 4,446 of households that are classified as fuel poor.

Background

The Health and Wellbeing Board is currently undergoing a refresh and development process. It has developed this strategy for 2018 – 2021. The underlying vision of the strategy is to “create healthy and resilient communities” by focussing on the three key priorities:

- Creating physically active communities
- Reducing social isolation and loneliness
- Narrowing the health inequalities gap

On the 9 August 2018, the Health and Wellbeing Board considered and supported the proposed strategy and since then this has been refined and updated. The strategy is in the form of a presentation which is intended for distribution after sign off from the Board with the intension of getting adopted from organisations in the Wokingham Borough.

Analysis of Issues

This is the latest iteration of the Health and Wellbeing strategy. The three priorities are analysed in the accompanying focused Joint Strategic Needs Assessment Chapters.

Partner Implications
All partners to review and acknowledge the strategy and utilise this in policy.

Reasons for considering the report in Part 2
N/A

List of Background Papers
Health and Wellbeing Strategy 2018-2021 Focused JSNA chapters

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