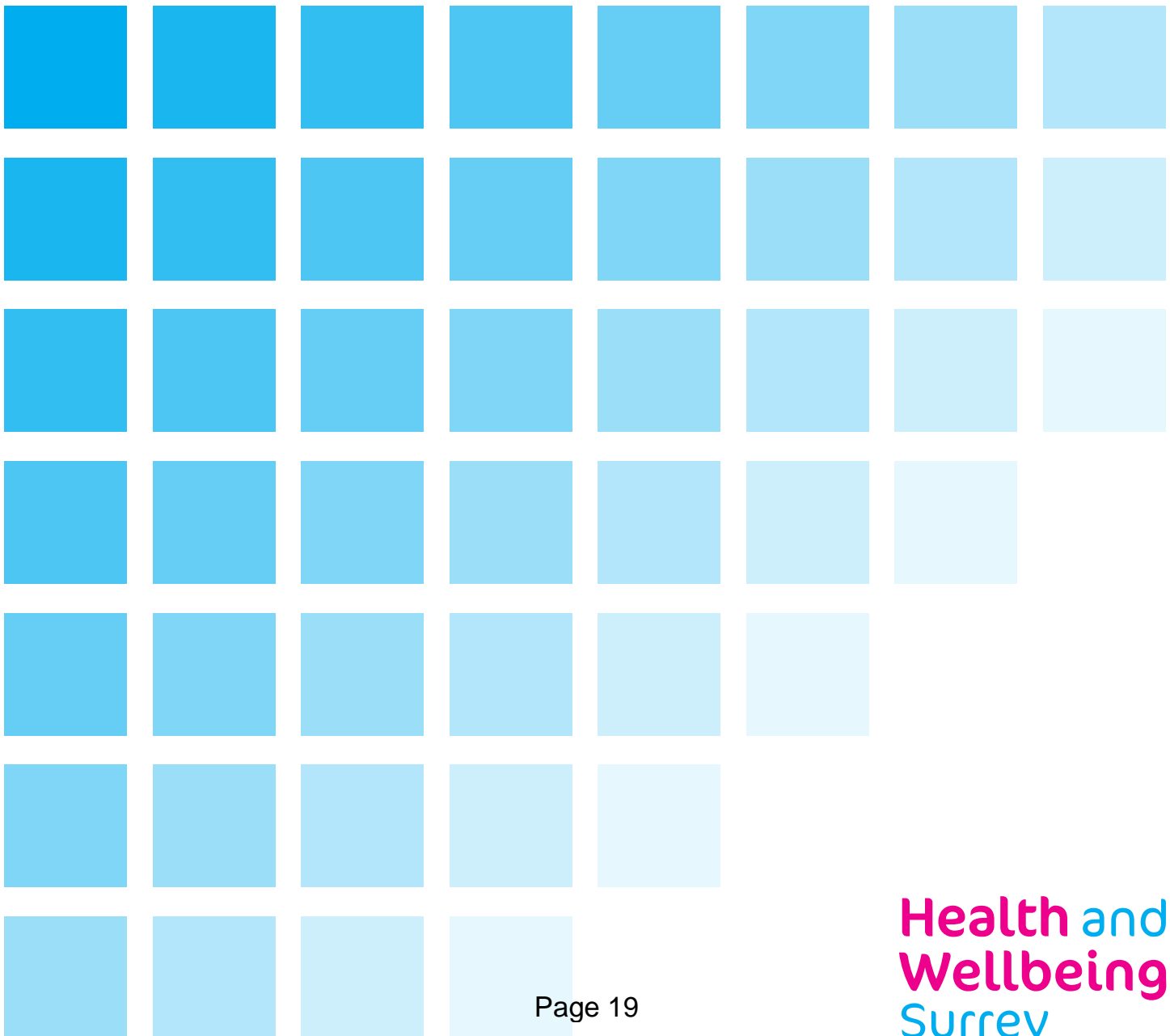


# Surrey's Joint Health and Wellbeing Strategy

“Through mutual trust, strong leadership, and shared values, we will improve the health and wellbeing of Surrey people”





## 5 Dear Residents/Patients

This is a 2018 refresh of the joint strategy between health and social care presented by the Health and Wellbeing Board. The joint strategy is an evolutionary document and the start of a conversation with you, our patients, people who use services, their carers, families, and partners.

This strategy sets out areas of priority and focus, which were selected based on what can we do better together than apart. Everything we do is to improve the health and wellbeing of you, the Surrey people.

### **County Councillor Helyn Clack**

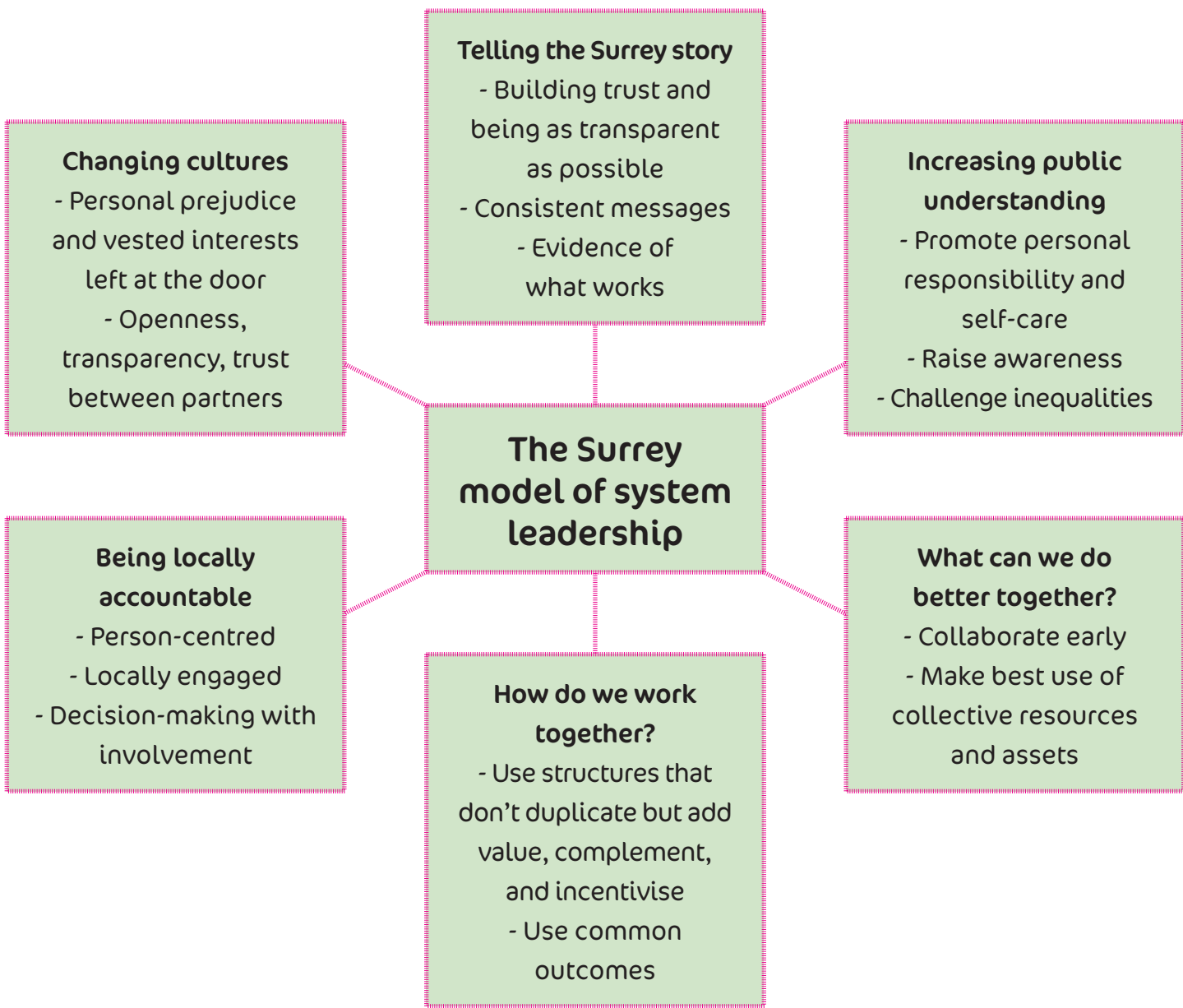
Cabinet Member for Health  
Joint Chair – Surrey Health and  
Wellbeing Board

### **Dr Andy Brooks**

Chief Officer – Surrey Heath Clinical  
Commissioning Group  
Joint Chair – Surrey Health and  
Wellbeing Board

Health and Wellbeing Boards were set up around the country in 2013 as part of the Government’s changes to the NHS. The Board is the place for the NHS, Public Health, children’s and adult social care, local councillors, voluntary, community and faith sector and service user representatives to work together to improve the health and wellbeing of the people of Surrey.

This joint strategy was refreshed by Surrey’s Health and Wellbeing Board in January 2018. The Board has set itself the ambitious challenge of developing the most innovative and effective health and social care system in the country. Surrey’s Board has built a strong foundation for leading this change by working in the following ways:



The Board sets direction and makes sure that direction is translated into activity, supporting each partner organisation. Some areas are led by specific partners and some are led by the Board as a whole.

To develop this strategy initially the Board asked for the help of Surrey residents, partner organisations and key stakeholders, to decide what it should focus on. While lots of work continues across all the areas considered, you helped us select five priorities where the Board should work together.

### **These are:**

- **Improving children's health and wellbeing**
- **Developing a preventative approach**
- **Promoting emotional wellbeing and mental health**
- **Improving older adults' health and wellbeing**
- **Safeguarding the population**

You can find more information about all the priorities in the Joint Strategic Needs Assessment at [www.surreyi.gov.uk](http://www.surreyi.gov.uk). This pulls together lots of information about people in Surrey, how they live, where they live and their health and wellbeing needs. This information, along with the views of residents and partner organisations, provided the evidence base for the Health and Wellbeing Strategy and the focused areas of each priority.

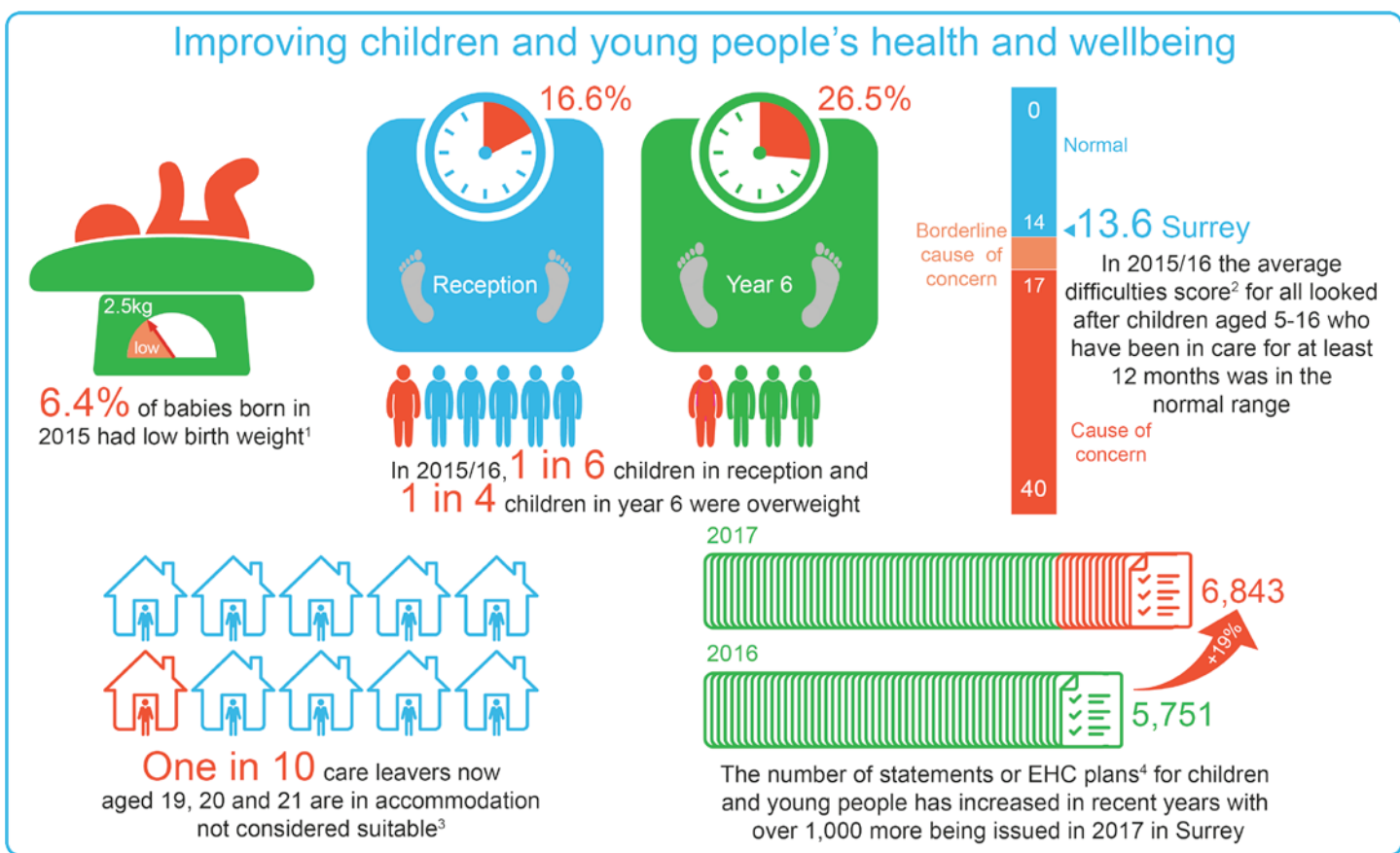
# Priority 1: Improving children’s health and wellbeing

Improving children’s health and wellbeing means giving every child the best start in life and supporting children and young people to achieve the best health and wellbeing outcomes possible. We can do this by supporting families from the very start, right through to children becoming adults, and giving additional support where this is needed.

## We will get this right so that:

- Children have a healthy weight
- The health outcomes for looked after children and care leavers improve
- Children with special educational needs and disabilities (SEND) have their educational, health and care needs assessed and met

## Our Joint Strategic Needs Assessment tells us that in Surrey:



<sup>1</sup> All births with a recorded birth weight under 2500g <sup>2</sup> Data is collected through a strengths and difficulties questionnaire (SDQ) and a single summary figure for each child (the total difficulties score), is submitted to the Department for Education through the looked after children return. A higher score indicates greater difficulties (a score of under 14 is considered normal, 14-16 is borderline cause for concern and 17 or over is a cause for concern). <sup>3</sup> Accommodation is to be regarded as suitable if it provides safe, secure and affordable provision for young people <sup>4</sup> Statements of Special Educational Needs or Education, Health and Care plans - Data sources: Office for National Statistics, NHS Digital - National Child Measurement Programme, Department for Education.

## Priority 2: Developing a preventative approach

We want to prevent ill-health and promote wellness, as well as spot potential problems as early as possible and ensure effective support for people. National and international evidence tells us that there is a clear link between social status, income and health, which creates a significant gap in life expectancy. Put simply people are healthy when they:

Have a good start in life, reach their full potential and have control over their lives, have a healthy standard of living, have good jobs and working conditions, live in healthy and sustainable places and communities.

You can find out more about this from: [www.instituteofhealthequity.org](http://www.instituteofhealthequity.org)

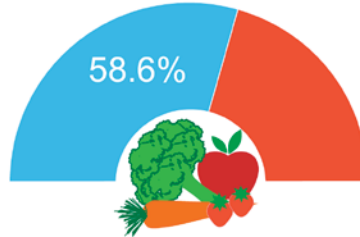
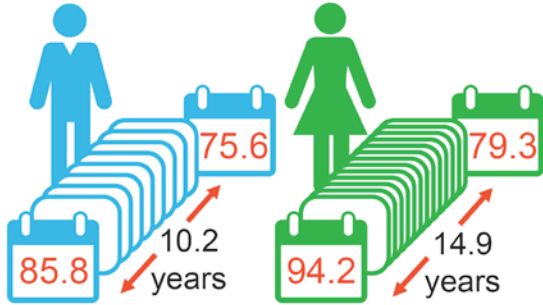
### We will get this right so that:

- **The gap in healthy life expectancy across Surrey narrows**
- **People (children, young people and adults) with multiple needs have better health outcomes**
- **People eat and drink healthily, are physically active and stop smoking**
- **People travel actively, air quality in Surrey is improved and health is embedded in planning**
- **People with learning disabilities live independently locally wherever possible**

# Our Joint Strategic Needs Assessment tells us that in Surrey:

## Developing a preventative approach

The life expectancy gap between wards in Surrey is **10.2** years for men and **14.9** years for women



**6 out of 10** adults eat the recommended 5 portions of fruit and vegetables per day

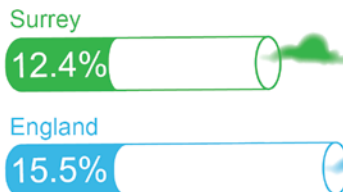
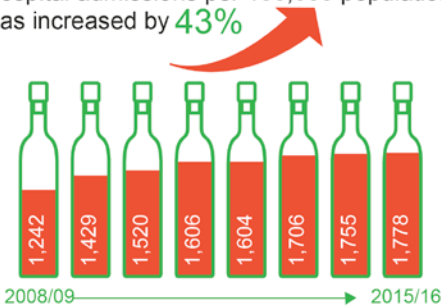


**6 out of 10** adults are overweight<sup>2</sup>



**Half** of adults walk for 10 minutes at least 5 times a week<sup>1</sup>

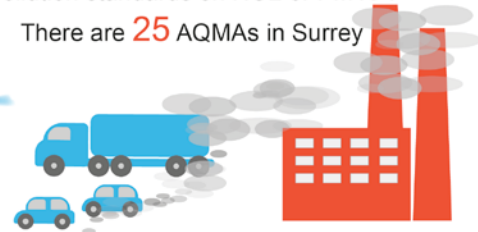
In the last 8 years the rate of alcohol-related hospital admissions per 100,000 population has increased by **43%**



In Surrey the estimated smoking prevalence for adults is lower than it is for England

Air Quality Management Areas (AQMAs) are set up for potential areas likely to breach pollution standards on NO<sub>2</sub> or PM<sub>10</sub><sup>3</sup>.

There are **25** AQMAs in Surrey



<sup>1</sup>Number of respondents aged 16 and over who did at least 10 minutes walking on twenty or more days in the 28 days of the survey period

<sup>2</sup>includes overweight and obese <sup>3</sup>nitrogen dioxide (NO<sub>2</sub>) and particulate matter under 10 microns (PM<sub>10</sub>).

Data sources: Public Health England, Department for Transport; Active People Survey, Sport England, Annual Population Survey (APS), Defra



## Priority 3: Promoting emotional wellbeing and mental health

Positive mental health is a foundation of individual and community wellbeing. The communities in which we live, the local economy and the environment all impact on an individual's mental health. We want to promote good mental health for the wider population, early intervention to support people with emerging mental health needs and effective treatment and support services for people with enduring mental health problems.

### We will get this right so that:

- **The gap in life expectancy for people with serious mental illness narrows**
- **Children, young people and families have good emotional wellbeing and mental health**
- **The provision of perinatal mental health services improves**
- **There is a reduction in the death rate from suicide**
- **People with mental health needs live independently wherever possible**

### Our Joint Strategic Needs Assessment tells us that in Surrey:



<sup>1</sup>The percentage of respondents scoring 6-10 to the question "Overall, how anxious did you feel yesterday?" <sup>2</sup>Adults who are receiving secondary mental health services on the Care Programme Approach recorded as living independently, with or without support, as a percentage of adults who are receiving secondary mental health services and who are on the Care Programme Approach (aged 18 to 69)

Data Sources: Office for National Statistics - Public Health England Annual Mortality Extracts, Annual Population Survey (APS), Health & Social Care Information Centre, NHS Digital



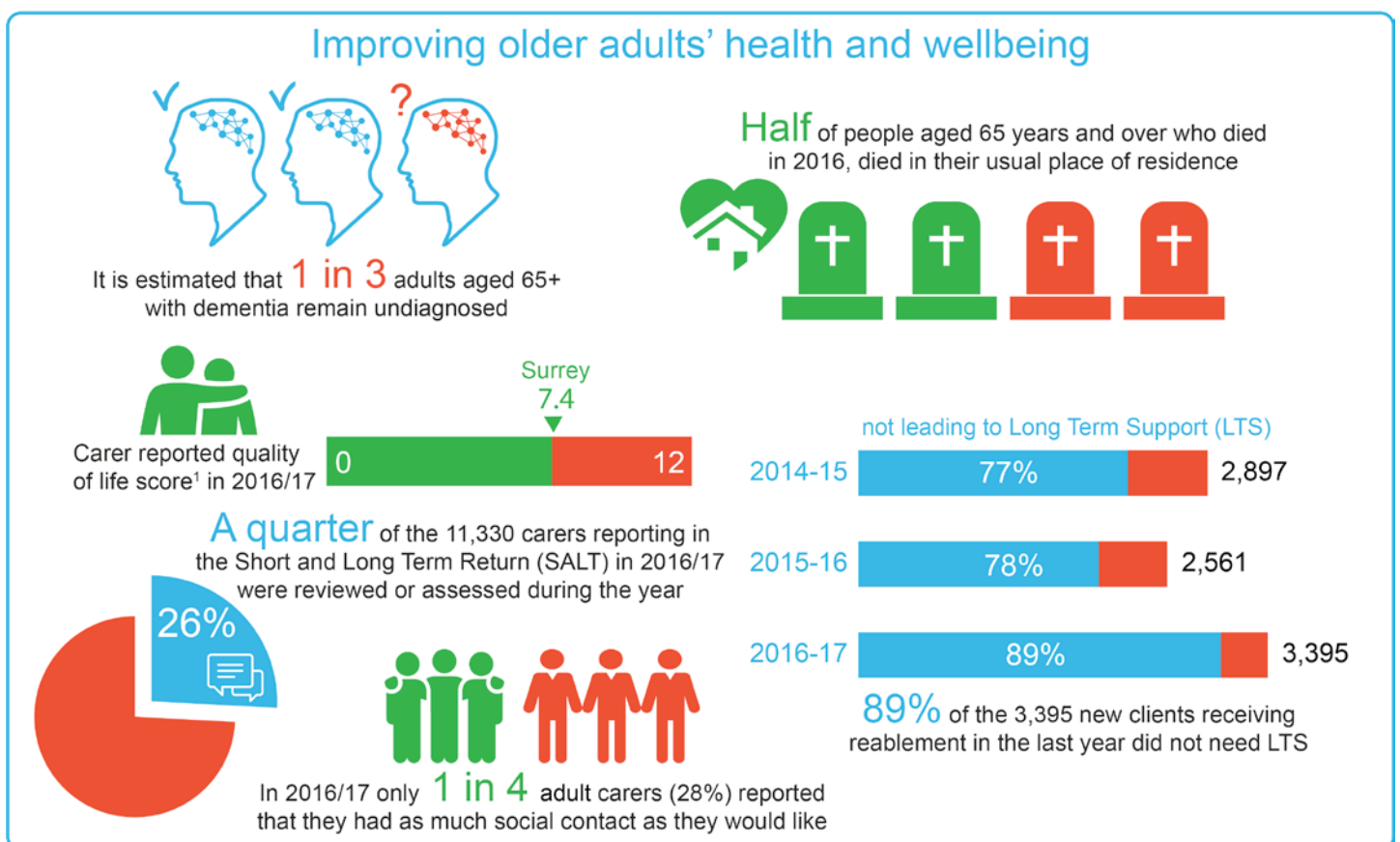
## Priority 4: Improving older adults' health and wellbeing

More people in Surrey are living longer. This is great news, but there are also some challenges. The growing number of older people in Surrey will have a major impact, as older people are more likely to experience disability and long-term conditions. Part of the challenge will be to make sure that the right services are in place so that older people can remain independent for as long as possible. The number of people over 85 years old is predicted to increase significantly. People over the age of 85 often need more support from health and social care services. They are also at greatest risk of isolation and of poor, inadequately heated housing, both of which can impact on health and wellbeing.

### We will get this right so that:

- **Older adults stay healthier and independent for longer**
- **Surrey is dementia friendly**
- **Carers are identified and supported**
- **People at the end of their life can choose where they die**

### Our Joint Strategic Needs Assessment tells us that in Surrey:



<sup>1</sup> Each respondent to the 'Survey of Adult Carers in England' (PSS SACE) is assigned a score based on their answers to six questions. Each of the questions has three answers. Scores are assigned to answers as follows: No needs met = 0 Some needs met = 1 No unmet needs = 2. The numerator is then a sum of the scores for all respondents who have answered all six questions. The maximum score possible is 12. Data sources: NHS Digital, PHE analysis of Office for National Statistics Mortality File, NHS Digital ASCOF, Personal Social Services Survey of Adult Carers in England.

## Priority 5: Safeguarding the population

Living a life that is free from harm and abuse is a fundamental right of every person and everyone has a responsibility for safeguarding children and adults. Any individual can be hurt, put at risk of harm or abuse regardless of their age, gender, religion or ethnicity. When abuse does take place, it needs to be dealt with swiftly, effectively and in ways that are proportionate to the issues, with the individual's views at the heart of the process.

Protecting this right means that people can grow up and live safely, and live a life that makes the most of their opportunities.

Working towards a Safer Surrey, we believe that children and their families have the strengths, resources and ability to recover from adversities.

### We will get this right so that:

- **Children, young people and adults are safe and healthy in Surrey**
- **There is a reduction in the number of people experiencing domestic abuse and repeat incidents of domestic abuse**
- **There is a reduction in the number of people experiencing sexual abuse, including child sexual exploitation, rape and assault**
- **There is a reduction in the number of children experiencing abuse and neglect**

## Our Joint Strategic Needs Assessment tells us that in Surrey:

### Safeguarding the population



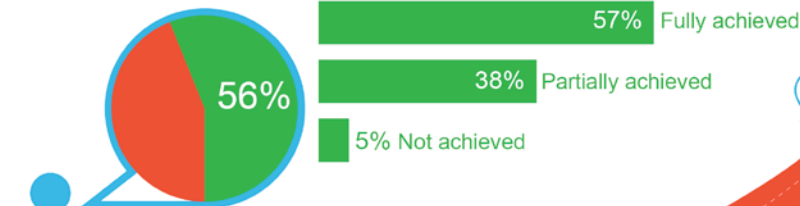
**51%** had their primary need<sup>2</sup> identified as "abuse or neglect" at assessment



**One in 6** of the 6,003 MASH<sup>3</sup> contacts received in October 2017 progressed to Children's Social Care;

**52%** of them within one working day

In October 2017 there were **123** children at risk from Child Sexual Exploitation



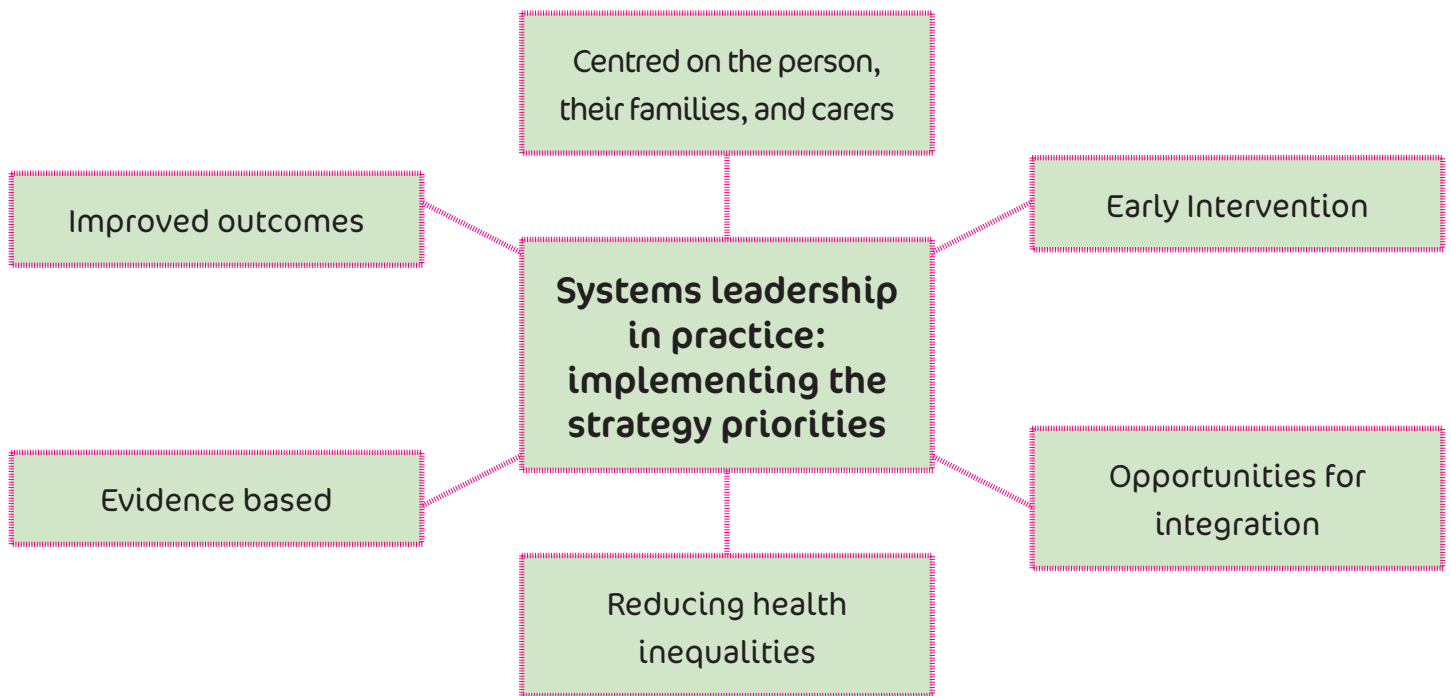
During 2016/17, more than half of adults at risk who were asked, expressed their desired outcomes and 57% of them said their outcomes were fully achieved



<sup>1</sup> A child in need is one who has been referred to children's social care services, and who has been assessed, usually through an initial assessment, to be in need of social care services <sup>2</sup> Primary need indicates the main reason why a child started to receive services <sup>3</sup> Multi Agency Safeguarding Hub <sup>4</sup> The definition of "domestic violence" used here is the Home Office definition: "any incident of threatening behaviour, violence or abuse [psychological, physical, sexual, financial or emotional] between adults who are or have been intimate partners or family members, regardless of gender or sexuality". Data sources: Surrey Police, SCC Performance Compendium, NHS Digital, Safeguarding Adults Collection (SAC) 2016/17, Department for Communities and Local Government

The Health and Wellbeing Board is the place to ensure each of these priorities is clear and present in the plans and actions of all its partner organisations. Each priority has an action plan and related strategy attached to it.

The Board has agreed a set of principles that will underpin its work together on each priority. The principles provide reference points for each discussion at the Board and will help to identify where to facilitate an improved outcome, support existing arrangements, challenge underperformance, or develop new ways of working:



The Board wants everybody in Surrey to be involved in improving their health and wellbeing.

You can keep an eye on the Board and let us know what you think or share any ideas you have by following us on [www.surreycc.gov.uk/healthandwellbeingboard](http://www.surreycc.gov.uk/healthandwellbeingboard).

As well as joining us at Health and Wellbeing Board meetings you can find out what is going on in your local area.

Healthwatch Surrey represent the views of local people on health and social care issues, and they are members of the Health and Wellbeing Board. You can contact them and they always welcome new volunteers who want to be involved.

We will be reviewing our strategy and looking at what we will need to do in the future. We really need your help to do this so please join in. To find out more visit [www.healthwatchesurrey.co.uk](http://www.healthwatchesurrey.co.uk).

## Working to improve your health and wellbeing

The Surrey Health and Wellbeing Board membership is made up of the following representatives:

### **County Councillor Helyn Clack**

Joint Chair, Surrey Health and Wellbeing Board, Cabinet Member for Health, Surrey County Council

### **Dr Andy Brooks**

Joint Chair, Surrey Health and Wellbeing Board, Chief Officer, Surrey Heath Clinical Commissioning Group

### **Dr David Eyre-Brook**

Chair, Guildford and Waverley Clinical Commissioning Group.

### **Helen Atkinson**

Strategic Director Adult Social Care and Public Health, Surrey County Council

### **Dr Charlotte Canniff**

Chair, North West Surrey Clinical Commissioning Group

### **County Councillor Clare Curran**

Cabinet Member for Children, Surrey County Council

### **David Munro**

Surrey Police and Crime Commissioner

### **Rose Durban**

Interim Strategic Director for Children's Services, Surrey County Council

### **Councillor Paul Spooner**

Leader, Guildford Borough Council (District and Borough elected member representative)

### **Dr Russell Hills**

Chair, Surrey Downs Clinical Commissioning Group

### **Peter Gordon**

Chair, Healthwatch Surrey

### **Tom Kealey**

Chief Executives Office, Reigate and Banstead Borough Council (District and Borough officer representative)

### **Councillor Clive Smitheram**

Majority Group Leader, Epsom and Ewell Borough Council (District and Borough elected member representative)

### **Dr Elango Vijaykumar**

Chair, East Surrey Clinical Commissioning Group

### **Dr Andy Whitfield**

Chair, North East Hampshire and Farnham Clinical Commissioning Group

### **Jason Gaskell**

Chief Executive, Surrey Community Action

## Useful links and references

For further details on the work of the Board visit [www.healthysurrey.org.uk/about](http://www.healthysurrey.org.uk/about) or contact us by email [healthwellbeingsurrey@surreycc.gov.uk](mailto:healthwellbeingsurrey@surreycc.gov.uk)

To find your nearest healthcare services and for comprehensive online information to help people make choices about their health visit: [www.nhs.uk](http://www.nhs.uk) and [www.healthysurrey.org.uk](http://www.healthysurrey.org.uk)

For health advice and information about local services call NHS 111; a free to call number when you need medical help fast, but it is not an emergency.

For information about the health needs of the Surrey population visit: [www.surreyi.gov.uk](http://www.surreyi.gov.uk)

To find out what local support and services are available in your area visit [www.surreyinformationpoint.org.uk](http://www.surreyinformationpoint.org.uk)

The Board will use the following indicators to monitor whether we have achieved what we set out to achieve and to track progress against the strategy:

## Priority ①

### Improving children's health and wellbeing

#### Outcome

- Children have a healthy weight
- The health outcomes for looked after children and care leavers improve
- Children with special educational needs and disabilities (SEND) have their educational, health and care needs assessed and met

#### Indicators

- Low birth weight of term babies
- Percentage of overweight or obese 10 – 11 year olds
- The average difficulties score for all looked after children aged 5-16 who have been in care for at least 12 months on 31st March
- Care leavers now aged 19, 20 and 21 by suitability of accommodation, by local authority
- The percentage of Education, Health and Care Plans (EHCPs) completed within the 20 week statutory timeframe, over a 12 month period

## Priority ②

### Developing a preventative approach

#### Outcome

- The gap in healthy life expectancy across Surrey narrows
- People with multiple needs have better health outcomes
- People (children, young people and adults) eat and drink healthily, are physically active and stop smoking
- People travel actively, air quality in Surrey is improved and health is embedded in planning.
- People with learning disabilities live independently locally wherever possible

#### Indicators

- Slope index of inequality at birth
- Statutory homelessness
- Re-offending levels per offender
- Percentage of smokers
- Rate of alcohol related admissions to hospital
- Particulate matter
- Rate of people in Surrey who walk or cycle to travel
- Life expectancy of people with learning disabilities



5 **Priority** ③

**Promoting emotional wellbeing and mental health**

**Outcome** →

- People (children, young people and adults) have good mental health and emotional wellbeing
- The gap in life expectancy for those with serious mental illness narrows
- The provision and outcomes of perinatal mental health services improves
- There is a reduction in the death rate from suicide
- People with mental health needs live independently wherever possible

**Indicators**

- Self-reported wellbeing score
- Number of people reached by the anti-stigma campaign 'Time to Change'
- IAPT access to treatment for older people (65+) as a proportion of older people in the adult population
- Proportion of people with SMI who have received complete list of physical checks
- Additional number of women receiving specialist perinatal care compared to baseline (placeholder)
- Rate of suicide
- Years of life lost due to suicide
- Proportion of people aged 18-69 in contact with adult mental health services in stable accommodation

**Priority** ④

**Improving older adults' health and wellbeing**

**Outcome** →

- Older adults stay healthier and independent for longer
- Surrey is dementia friendly
- Carers are identified and supported
- People at the end of their life can choose where they die

**Indicators**

- Estimated diagnosis rate for people with dementia
- Carer reported quality of life
- Rate of carers receiving assessments
- Proportion of people dying in their preferred place of death
- The number of people accessing reablement services
- Proportion of people that had reablement services that required no ongoing long term support

## Priority ⑤

### Safeguarding the population

## Outcome

- Children, young people and adults are safe and healthy in Surrey
- There is a reduction in the number of people who experience domestic abuse and repeat incidents of domestic abuse
- There is a reduction in the number of people who experience sexual abuse, including child sexual exploitation, rape and assault
- There is a reduction in the number of children who experience abuse and neglect

## Indicators

- Number of children in need
- Percentage of children with abuse or neglect identified at their primary needs assessment
- Rate of domestic abuse incidents recorded by police
- The percentage of MASH contacts with a decision made within timescales
- No. of children at risk from Child Sexual Exploitation (CSE)
- % of Care Leavers with a completed Pathway Plan
- Making Safeguarding Personal



5 For more detail on how we are doing in Surrey, with comparisons to other areas, see the Health and Wellbeing Board dashboard on [www.surreyi.gov.uk](http://www.surreyi.gov.uk)

