

Appendix 1: Draft joint Health & Wellbeing Strategy

Luton's joint Population wellbeing Strategy 2019-2024

Our ambition:

Luton is a more equitable place where people thrive, have the opportunity to live a healthy life mentally, socially and physically; and maximize their potential.

Foreword

Health and Wellbeing Boards were created to improve the key health and wellbeing issues in an area: those issues that can only be resolved by partners working together to a common goal. This strategy is part of a wider programme of action we are taking to eradicate poverty, Luton 2040 (*A growing town built on fairness: A town of hope and aspiration, where everyone can share in its success*).

By working together to build trust and gain a common purpose to deliver our first strategy published in 2012, the partners on Luton's Health and Wellbeing Board have made a real impact on the lives of some of our more vulnerable citizens in our town. We will continue to strive to improve the health and wellbeing of Lutonians.

Over the next five years, we can make some real changes that will enable people to reach their full potential. Real success will come from us working with Luton's community, building on all our strengths to maximise the solid foundations we have already built to enable *the people of Luton to thrive*.

Hazel Simmons

Chair of the Health and Wellbeing Board,
Leader of Luton Borough Council

Nina Pearson
Vice Chair of the Health and Wellbeing Board
Chair Luton Clinical Commissioning Group

Background

Much has changed since the Health and Wellbeing Board set out its initial strategy in [2012](#) and refreshed it in [2016](#). We have seen reductions in infant deaths, improvements in life expectancy and a reduction in the gap between the richest and poorest communities within the borough as well as reductions in homelessness. However, this progress in life expectancy has stalled in the last couple of years, as nationally and therefore there is still more we wish to do together.

This strategy is our on-going commitment to come together to agree and work for the future we want for Luton and a starting point from which we will develop ever-stronger future versions. We will look to refresh our ambitions periodically with the aim of **Eradicating poverty in Luton by 2040**.

Throughout 2019 we have been discussing and agreeing where the areas of focus should be to achieve this aim. We have updated our membership to ensure we have the right voices around the table and agreed on where we should put our collective energies so that everyone in Luton will have the opportunity to live a life where they are mentally, socially and physically healthy; where there is equity and everyone can maximise their potential.

This is in the context of the Council setting out its long-term plan for the town (Luton 2040 – to eradicate poverty by 2040). This strategy's parallel strategy, Inclusive Economy, sets out local priorities for us to deliver on. Delivery strategies will include Luton's response to the [NHS Long-term plan](#), as part of a wider partnership across [Beds, Luton and Milton Keynes](#). These actions collectively will enable us to continue to drive improvements in health and wellbeing for the people of Luton.

Our Ambition

Luton is a more equitable place where people thrive, have the opportunity to live a healthy life mentally, socially and physically; and maximize their potential.

What approach will we take?

We know poor health can be experienced throughout life and the circumstances, in which people are born, grow, live, work and age will have an impact on people's wellbeing. If we do not try to positively promote wellbeing from birth (if not pre-birth), we will always be managing or seeking to ameliorate poor health. From this point of view, a preventative approach from the beginning of life to death, considering the wide range of factors that influence health, is our keystone. We will do this by approaching a healthy life in three stages, taking action on the wider factors that affect people's health.

- 1) Starting & Developing Well – where we lay the foundations for a healthy life,
- 2) Living & Working Well – where we ensure people have the opportunity to live a healthy life in a healthy environment and have access to good employment
- 3) Ageing & Dying Well – where we capitalise on the work done above to live a healthy old age.

Therefore, our action and outcomes will be under these three main themes. This Strategy sets out the Board's view of the critical foundations on which a healthier population, living longer lives in healthy environments, free from health inequalities will be based. Our goals are that:

1. Every child in Luton achieves the level of development needed in their early years to provide the foundation for a healthy life
2. Every child is healthy, including having a healthy weight and good oral health
3. Every child and young person has access to a good education support when needed
4. Every young person in Luton is safe, skilled and equipped to be successful throughout their life
5. Every adult in Luton is physically and mentally healthy and able to thrive

6. Every adult in Luton has access to training to develop skills and access to good employment required to drive our commitment to eradicate poverty
7. Everyone in Luton lives in good quality housing, has access to green space and good air quality
8. Everyone in Luton has the level of meaningful social contact that they want
9. Everyone in Luton lives the end of their life with dignity in the place of their choice

Our Inclusive Economy work aims to make improvements to the social and economic factors that impact on people's wellbeing (i.e. better incomes, improved skills, regenerated town and neighbourhood areas, opportunities for participation in culture) and acts in conjunction with the Health and Wellbeing Board to achieve our Luton 2040 ambition.

How will we know we are successful?

The overall success of the strategy will be measured through improvements in a number of overarching outcomes as set out below from a baseline of 2019 to 2024 (APPENDIX C). These outcome measures, which have been developed as part of our population health indicators, will be reviewed and updated as required. Specific improvements in these indicators will be developed by the Delivery Boards and agreed with the Health and Wellbeing Board. Delivery Boards will give bi-annual updates on progress.

Healthy life expectancy is the best overall measure of both health and health inequalities, representing the number of years someone can expect to live in good health. In Luton, the gap between the best and worst off is 13 years for males and 15 years for females. This is similar to our statistical neighbours. Our goal therefore is primarily to close the gap in healthy life expectancy in Luton by improving the health and wellbeing of the poorest and most vulnerable the fastest.

Implementation

The Board will continue to provide direction and vision, acting as a guiding partnership, offering partners the opportunity for shared decision-making to deliver shared outcomes. The general principles in which the Board will work are:

- This is a collective effort and we will not be constrained by professional or organisational boundaries
- We will set our ambitions with stakeholders and residents, working with and for communities
- We will learn from the best and adapt to local circumstances
- Our work will be led by data, evidence and local intelligence taking in the whole picture
- Our efforts will focus on what is effective to solve problems and deliver outcomes
- We will generate both long-term and short-term solutions and be honest about what happens first.

The Board will provide effective governance to ensure delivery of our ambitions and continue to ensure we have the right **focus** for the town, which we all agree to concentrate on and contribute to. It will be a place to enable partners to engage in a meaningful way with the town's future and a way of **sequencing** a range of activity as a town so that the early deliverables make longer-term goals possible to achieve.

The Board will critique **annual reviews** of our delivery plans to ensure the priorities (Appendix A) remain relevant and outcomes are being achieved. To enable and support implementation of these plans, the Board will implement a **support programme** of training and development, not just for officers but more importantly to supporting local **community champions** who support residents.

The Board will work in conjunction with the "Inclusive Economy" Board (to be developed) to drive action towards Luton 2040 ambition, acknowledging and sharing progress in the two Boards' shared interests to ensure action is maximised. These two boards with shared interests (Figure 2) will be part of the overall governance for delivery (see Appendix B) of the Luton 2040 ambition. The Health Inequalities Board will

provide challenge and support to both the Health and Wellbeing Board and Inclusive Economy Board to ensure that the actions taken are improving the health and wellbeing of the poorest the fastest.

DRAFT

Figure 1. DRAFT Delivery model

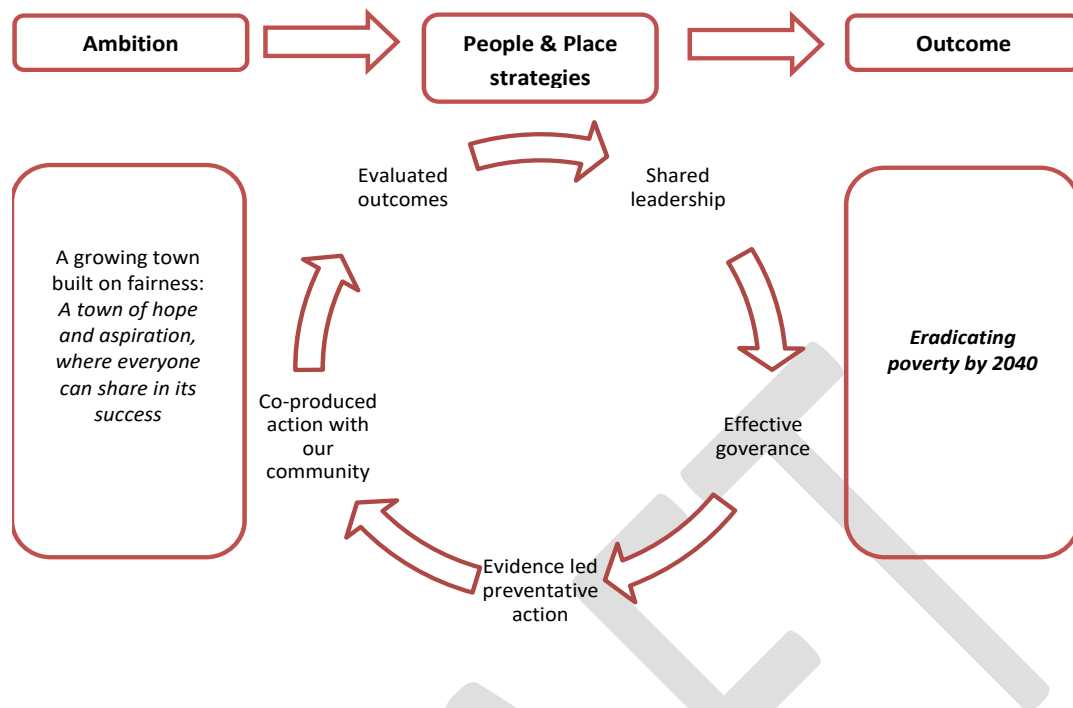
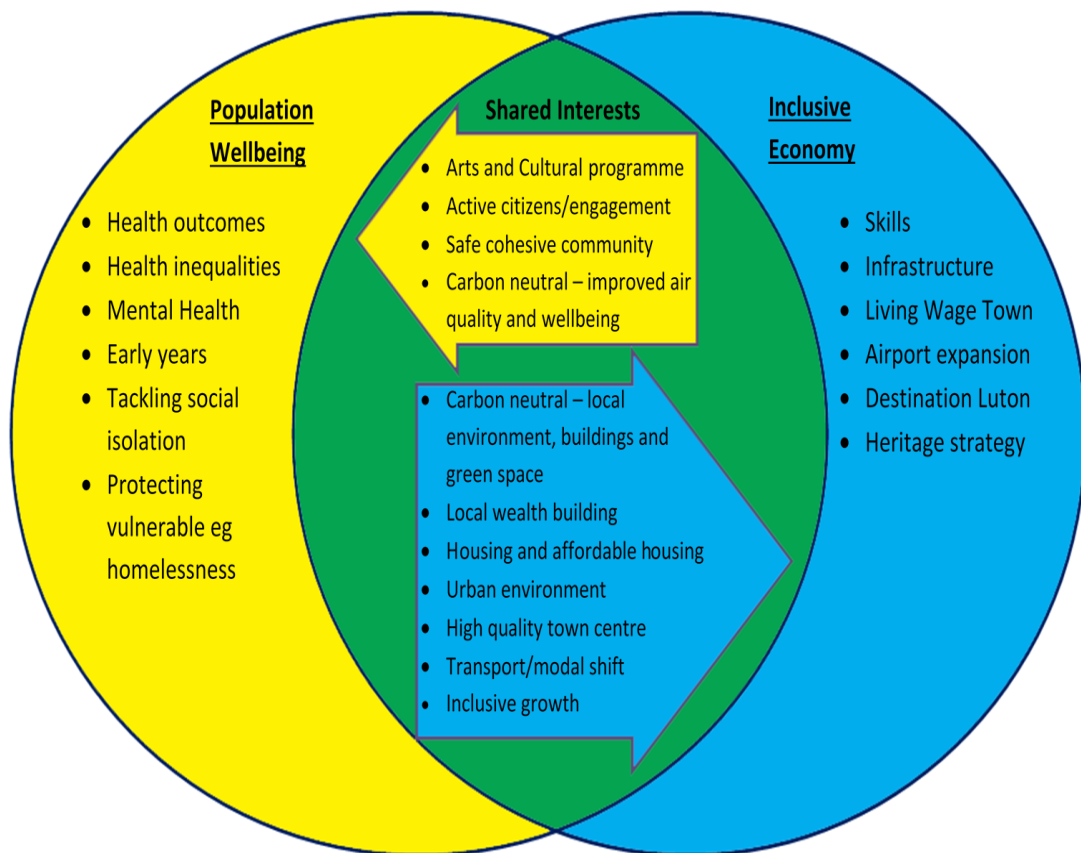
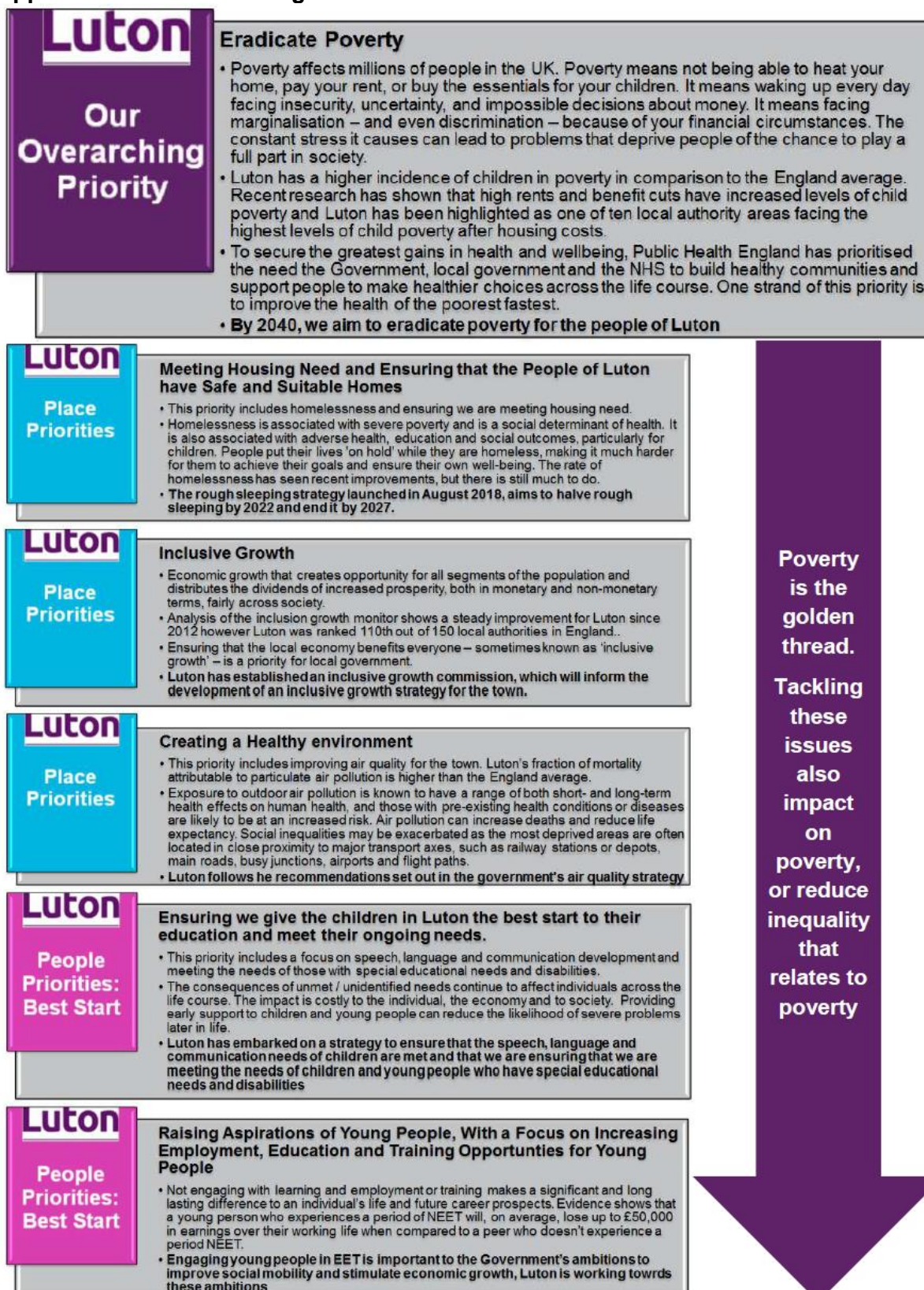
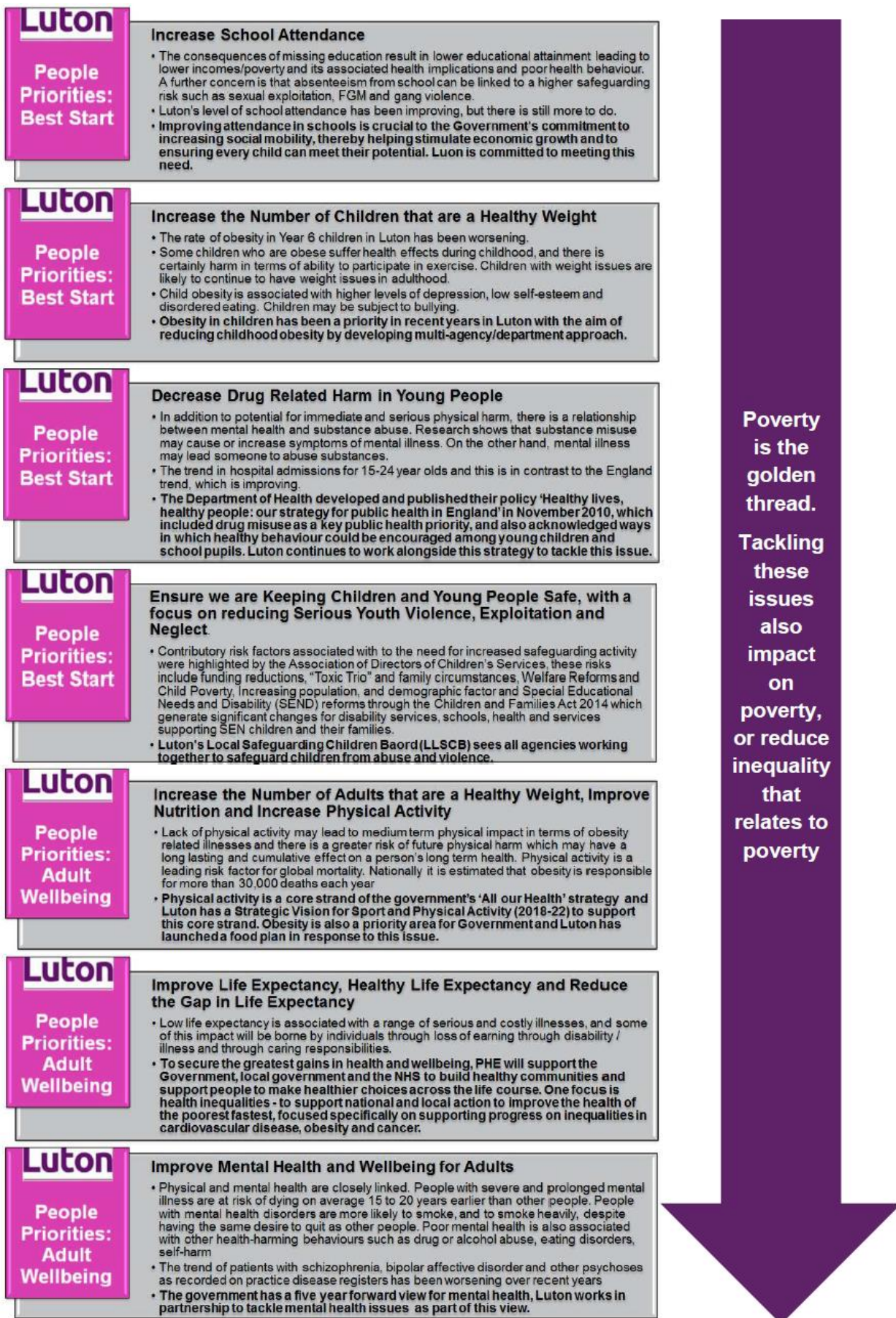


Figure 2: DRAFT parallel work streams outlining shared interests



Appendix A. Luton's strategic Priorities





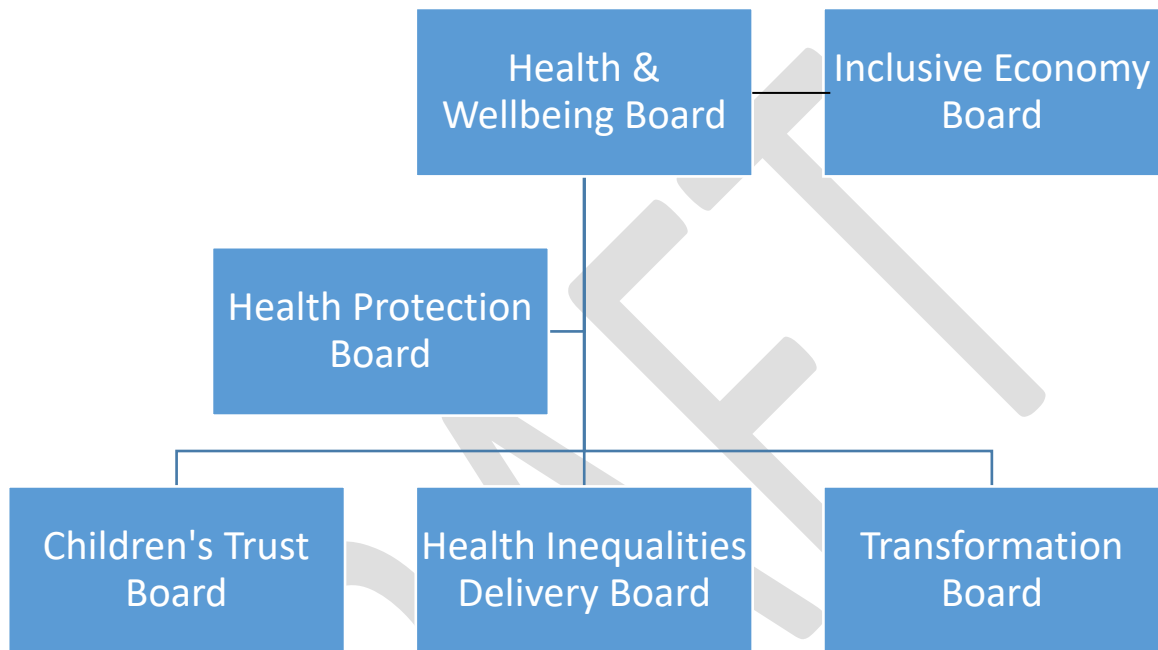
Luton People Priorities: Adult Wellbeing	Ensure we are Keeping Adults Safe and Encouraging Positive Relationships, with a focus on reducing Domestic Abuse <ul style="list-style-type: none"> • This priority includes safeguarding in general, with a priority focus on domestic abuse. • There are different kinds of abuse that can happen in different contexts. The most prevalent type of domestic abuse occurs in relationships. But the definition of domestic abuse also covers abuse between family members, such as adolescent to parent violence and abuse. There are clear links to mental ill health and substance misuse as well as links to poverty. • Luton's Community Safety Partnership recognises a long term commitment to tackling issue of domestic abuse and is committed to this issue.
Luton People Priorities: Adult Wellbeing	Meeting the needs of carers <ul style="list-style-type: none"> • The most recent adult survey data for Luton suggests that over half of carers do not have time to take care of themselves properly and a quarter neglect their own needs to fulfil the caring role. • Caring is also associated with stress, depression and social isolation. The Luton carer survey for 2018/19 showed that, as a result of their caring responsibilities, many respondents were depressed or stressed • As a result on the care act in 2014, support has changed for the better. This allows carers to get the support they need for their own wellbeing. Luton provides support for carers as a priority.
Luton People Priorities: Adult Wellbeing	Decrease Drug and Alcohol Related Harm in Adults <ul style="list-style-type: none"> • Alcohol consumption is a contributing factor to hospital admissions and deaths from a diverse range of conditions. Drug misuse and dependency can lead to a range of harms to the wider society, including: poor physical and mental health and ultimately death, unemployment, homelessness, family breakdown and criminal activity • The 2012 alcohol strategy sets out proposals to crackdown on our 'binge drinking' culture, cut the alcohol fuelled violence and disorder that blights too many of our communities, and slash the number of people drinking to damaging levels. It is also a PHE priority is to assist local authorities to deliver the Home Office programmes to support the public health and criminal justice system to implement the Home Office's Drugs Strategy.
Luton People Priorities: Ageing Well	Increase Social Connectedness. <ul style="list-style-type: none"> • Loneliness and social isolation has an impact on health and wellbeing. People with a high degree of loneliness are twice as likely to develop Alzheimer's as people with a low degree of loneliness. Loneliness increases the risk of high blood pressure, onset of disability, cognitive decline, depression and developing clinical dementia. The effect of loneliness and isolation on death exceeds the impact of well-known risk factors such as obesity, and has a similar influence as cigarette smoking. • Government strategy to tackle loneliness, sets out the approach to tackling loneliness in England. It marks a shift in the way we see and act on loneliness, both within government and in society more broadly. This is tackled locally in the Future Living Needs of Luton's Older People's Strategy
Luton People Priorities: Ageing Well	Improving Physical Health in Older People, with a focus on reducing falls and frailty <ul style="list-style-type: none"> • Increased frailty is associated with increased risk of a range of poor health outcomes, some of which may require significant medical intervention or may result in early mortality • Falls are an event resulting from the presence of risk factors. The likelihood and severity of injury resulting from this event is related to bone health. People with low bone mineral density are more likely to experience a fracture following a fall. One of the main reasons why people have low bone mineral density is osteoporosis. • This is tackled locally in the Future Living Needs of Luton's Older People's Strategy.

**Poverty
is the
golden
thread.**

**Tackling
these
issues
also
impact
on
poverty,
or reduce
inequality
that
relates to
poverty**



Appendix B. Governance structure



Appendix C. Outcome measures

Ambition	Outcome measures
Overall ambition: Luton is a more equitable place where people thrive, have the opportunity to live a healthy life mentally, socially and physically; and maximize their potential.	<ul style="list-style-type: none"> • Healthy life expectancy at birth (Male) • Healthy life expectancy at birth (Female) • Life expectancy at birth (Male) • Life expectancy at birth (Female) • Inequality in healthy life expectancy at birth within LA (Male) • Inequality in healthy life expectancy at birth within LA (Female)
Our Goals	
Goal 1: Every child in Luton achieves the level of development needed in its early years to provide the foundation for a healthy life	<ul style="list-style-type: none"> • School Readiness: the percentage of children achieving a good level of development at the end of reception • School Readiness: the percentage of Year 1 pupils achieving the expected level in the phonics screening check • Pupil absence • Percentage of children achieving at least an expected level of development across all learning goals in communication and language • Percentage of children where there is a cause for concern • Child poverty
Goal 2: Every child is healthy, including having a healthy weight and good oral health	<ul style="list-style-type: none"> • Reception: Prevalence of overweight (including obesity) • Year 6: Prevalence of overweight (including obesity) • Proportion of five year old children free from dental decay • Children with one or more decayed, missing or filled teeth
Goal 3: Every child and young person has access to a good education support when needed	<ul style="list-style-type: none"> • Homeless young people aged 16-24 • Average Attainment 8 score
Goal 4: Every young person in Luton is safe, skilled and equipped to be successful throughout their life	<ul style="list-style-type: none"> • 16-17 year olds not in education, employment or training (NEET) or whose activity is not known • Statutory homelessness - households in temporary accommodation •
Goal 5: Every adult in Luton is physically and mentally healthy and able to thrive	<ul style="list-style-type: none"> • Percentage of physically active adults • Estimated prevalence of common mental disorders in people aged 16 and over

Goal 6. Every adult in Luton has access to training to develop skills and access to good employment required to drive our commitment to eradicate poverty	<ul style="list-style-type: none"> • Percentage of people aged 16 - 64 in employment •
Goal 7. Everyone in Luton lives in good quality housing, has access to green space and good air quality	<ul style="list-style-type: none"> • Homeless adults • Access to woodland • Air pollution: fine particulate matter • Utilisation of outdoor space for exercise/health reasons
Goal 8: Everyone in Luton has the level of meaningful social contact that they want	<ul style="list-style-type: none"> • Social Isolation: percentage of adult (18+ yrs.) social care users who have as much social contact as they would like • Social Isolation: percentage of adult (18+ yrs.) carers who have as much social contact as they would like
Goal 9: Everyone in Luton lives the end of their life with dignity in the place of their choice.	<ul style="list-style-type: none"> • Percentage of deaths in usual place of residence (DiUPR) (All ages) • Percentage of deaths that occur in hospital (All ages) • Deaths in Usual Place of Residence: People with dementia (aged 65 years and over)