

Draft Milton Keynes Joint Health and Wellbeing Strategy

2015 - 2018



Foreword

Our joint Health and Wellbeing strategy for Milton Keynes 2015-2018 places our community at the heart of our commissioning intentions to improve health and wellbeing and to reduce health inequalities for our population. We care about making a difference in peoples' lives, to help the residents of Milton Keynes to live happier lives for longer.

This strategy builds upon our achievements of the first strategy (2012-2015) as well as recognising some of the challenges we faced and outlines how we can work together to address these.

Our first Health and Wellbeing strategy, 2012-2015 demonstrates some outstanding key achievements:

- Sports participation – We have one of the highest rates for sports participation in England and we continue to see improvements.
- Dementia - Our dementia patients' diagnosis rates have seen an improvement to include early support of dementia patients.
- Alcohol related hospital admission – We have seen a significant decrease in admission rates among under 18 year olds
- Carers - A higher number of carers are being assessed and supported with a range of services.
- NHS Health check – We have seen a significant increase in the number of eligible people who are offered and receive an NHS Health Check.
- Older people - The number of carers who are able to remain in their own home following a stay in hospital is one of the highest in England
- Neighbourhood Employment Programme - Over 600 people are now supported into employment through our Neighbourhood Employment Programme.
- Adult Social Care Services - The number of users of who say the services make them feel 'safe and secure' is higher than the England average.

We remain committed to continue to work hard to ensure that the population of Milton Keynes is able to access services to support them in living the most fulfilling and healthy life.

We aim to work in partnership to focus on the key priorities outlined in this strategy so that people living and working in Milton Keynes have every opportunity to improve their health and wellbeing.

Cllr Peter Marland

Dr Nicola Smith

Introduction

How this strategy was developed

Joint Strategic Needs Assessment

The Joint Strategic Needs Assessment (JSNA) is a robust tool that identifies the current and future healthcare needs of Milton Keynes population. Developed by key partners, it provides the evidence to help us inform the commissioning intentions and planning around how organisations can work together to improve the health and wellbeing of the population of Milton Keynes.

This strategy has been developed taking into account the key needs identified in the JSNA as well as the key actions to improve health that are outlined in the JSNA.

Key stakeholders and community engagement

Our stakeholders are key to any decisions and plans we propose for the residents of Milton Keynes. We will continue to work in partnership and develop joint strategies that support us in achieving sustainable health outcomes.

As part of initiating partnership working and development of the Health and Wellbeing strategy, a proposal to apply a life course approach to the strategy was presented to a number of our stakeholders. The proposal highlighted the key issues for health and wellbeing in Milton Keynes, as well as a summary of the previous strategy.

As part of the process our stakeholders were asked to give their views on the life course approach to include discussions around the key health priorities for each life course stage: starting well, living well and ageing well. The feedback collated demonstrates overall support of the life course approach, the inclusion of mental health in all stages and an opportunity to pick up specific issues that relate to different localities. Furthermore, it was agreed that where the environment and infrastructure of Milton Keynes could contribute to health and wellbeing this would be included in each appropriate life course section.

The stakeholder groups consulted included: CCG Programme Boards, Partnership Boards, local communities, MKC staff and the Voluntary sector. All of our stakeholders share the aim to identify the most

important priorities for our Health and Wellbeing Strategy and to work together to support Milton Keynes residents to live healthier lives for longer.

Our key health indicators developed from the JSNA to include the views of local stakeholders are –

How we live:

Starting Well: Giving every child the best chance in life

- To improve the start in life for children, with those in greater need receiving more support.

Living Well: Working with communities to live longer and healthier lives

- To reduce the number of premature deaths, improve mental health and reduce the unacceptable levels of health inequalities in these areas.

Ageing Well: Improving outcomes for older people

- To support older people with common mental health problems and prepare services for the increasing pressures of demographic, social and economic changes.

Where we live:

The Place: Making Milton Keynes a healthy city

- To maximise the opportunities for the environment of Milton Keynes to support healthy living for our residents.

Health and Wellbeing in MK

The overall health of the Milton Keynes population demonstrates a need for improvement with a higher demand in the areas of deprivation. Statistics indicate that life expectancy within the most deprived areas of our communities is more than 5 years lower than in the more affluent areas of Milton Keynes.

The Milton Keynes population is growing in size and diversity

We have more than a quarter of a million people who live in Milton Keynes. Over the next 10-15 years we expect to see the population of Milton Keynes grow by 49,700 people, approximately 20% increase, equating to an increase of more than 20,000 in the number of over 65 year olds. This will place an increasing demand on our health and social care services.

Too many children have a poor start to life and suffer health problems

Our health outcomes for Milton Keynes' children and young people indicate that 70,000 have a good health status and others are improving. We have seen the infant death rate decrease since 2000-2002 to bring the

figures closer to the national average and our under 18 conception rates remain below the England average. In 2014, 62% of Early Years Foundation Stage children achieved a good level of development compared to 49% in 2013. However, almost a third of year 6 pupils are overweight or obese and rates of admissions for lower respiratory tract infection among children have been higher than the England average.

Premature deaths contribute to life expectancy at birth which is six months less than the national average

Life expectancy, a summary measure of death rates at different ages, has improved steadily over the past decade. The figures recorded for Milton Keynes indicate the average age of death for men is 78.7 years of age and 82.5 years of age for women. However, this is half a year below the national average for England for both men and women.

- Far too many people's lives continue to be shortened because of smoking, excessive drinking, unhealthy eating and physical inactivity. Unhealthy behaviours occur at all ages. We need to continue to incorporate plans to address elderly people and children and their parents to ensure sustainable behaviour change remains within our commissioning intentions.
- There are inequalities in almost all aspects of health that we need to continue to monitor and evaluate.
- The gap in life expectancy is slowly narrowing for both men and women and is now 7.1 years lower for men and 5.3 years lower for women in the most deprived areas of Milton Keynes compared to the least deprived areas. This is respectively 2.1 and 1.5 years better than the England average gap.
- It is in the more disadvantaged communities of Milton Keynes where we see many health and social problems are prevalent.





Mental health problems affect people of all ages

Approximately 26,000 of our residents are thought to have a mental health disorder and over 11,000 have two or more mental health disorders. It is estimated that almost 4,000 children aged between 5-15 years of age and 30% of older people have a mental health concern. Among older people the most common problems we see are depression and anxiety and two thirds of older people with depression never discuss it with their GP.

The city's environment could contribute more to healthy outcomes

Within Milton Keynes, there is a high quantity of car users and low levels of cycling. There is a risk that increasing the number of houses will lead to increased levels of car travel which could impact on air quality and noise levels. In Milton Keynes over 5,000 households are thought to be in fuel poverty. By the end of 2013/2014 the Council had accepted a full duty to 515 homeless households, compared to 84 in 2009/10.

Health in Milton Keynes indicates that overall health is considered poorer than the national average compared to other areas with similar levels of deprivation. However, with an ambitious and holistic partnership approach we would predict sustainable increased levels of good health. The design of Milton Keynes, its community spaces, its roads and paths, and its homes has a significant impact on health of young and old alike. The environment of Milton Keynes could contribute more to healthy living.

Starting Well: Giving every Child the Best Start in Life

Children in Milton Keynes are relatively healthy but still we see too many suffer from mental and physical health problems.

The behaviour of parents and the environment which children grow up in are the crucial determinants of whether a child gets the best start in life. We need to continue to identify the children living in difficult circumstances or with complex needs and support both them and their parents to maintain the best possible healthy and fulfilling life.

What we need to do

Prevention

- Ensure the early identification and support of parents and children who have the most need: those exposed to the 'toxic trio' of being born into families with poor mental health, who misuse drugs and alcohol and where there is domestic abuse.
- Ensure appropriate antenatal care and maternity services, especially for women from more deprived communities and the increasing numbers of pregnant women from BME groups is easily accessible and available.



- Ensure there are adequate perinatal mental health services.
- Ensure informed development assessments and parenting support that contribute to enable all children to start school ready to learn.
- Ensure that children and young people are actively supported to make healthy lifestyle choices and reduce risky behaviours.
- Work within schools and other settings to build self-esteem in young people and identify children at risk of poor mental health early to ensure access to appropriate services.
- Focus on reducing the gaps in educational attainment.
- Develop mentoring schemes for young people who do not have positive role models.
- Reduce child poverty through interventions to increase household resources and reduce outgoings.
- Promote the baby friendly approach to increase rates of breast feeding.
- Build the confidence of practitioners to provide support with engaging in conversations and emotional wellbeing and mental health issues.
- Reduce homelessness, with a focus on family homelessness, by early identification of those at risk and developing local capacity to provide accommodation.
- Ensure public transport is accessible to young people and where appropriate to children and young people with disabilities.
- Ensure access to high quality early years education where there is a need and demand, for example close to places of employment.

Services/support

- Ensure that a maternal obesity programme is offered to all women with a BMI of 30+.
- Increase programmes for children who are identified as overweight or obese.
- Redesign paediatric pathways to ensure access to care closer to home to reduce hospital admissions.
- Tackle child sexual abuse and exploitation through the provision of awareness raising and training.
- Minimise the impact of the 'toxic trio' on children and young people through improved early support to the whole family, for example, ensuring the sustainability of the Family Drug and Alcohol Court.
- Develop appropriate specialist mental health provision for vulnerable groups, for example children with trauma and attachment difficulties.
- Embed the interagency special educational needs and disability reforms.
- Take a targeted approach to taking services into communities where they are needed and make use of community facilities for services.

What will change?

- Reduced likelihood of developing preventable mental health issues
- Reduction in levels of childhood obesity
- More children will be physically active
- Reduction in hospital admissions for children and young people
- Reduction in incidents of repeat domestic abuse
- Improved scores for Good level of Development at Foundation Stage
- The impact of the 'toxic trio' will be reduced
- Homelessness will decrease



Living Well: Working with Communities to Live Longer and Healthier Lives

Milton Keynes has a higher rate of death under 75 years of age than areas with comparable levels of deprivation. More than 25,000 people in Milton Keynes have mental health problems.

What we need to do

Prevention

- Reduce levels of smoking through tobacco control measures and stop smoking services.
- Increase opportunities to prompt healthier lifestyles, for example utilising the Make Every Contact Count (MECC) approach. Promote and increase the uptake of flu vaccination.
- Increase uptake of NHS Health Checks for males and females of those that are eligible - aged between 45-74
- Increase early diagnosis of cancer by promoting screening programmes and symptom awareness campaigns.
- Increase the early detection and management of disease e.g. high blood pressure.
- Identify people with long term conditions at risk of hospital admission and provide pathways and alternative options of accessing healthcare.
- Increase the levels of physical activity in adults.
- Increase early identification and treatment for HIV.
- Develop community wellbeing plans that address the needs of communities where greater need is identified.
- Reduce fuel poverty and support people to address housing issues – provide advocacy, advice and facilitate access to funding.
- Improve the walking and cycling infrastructure and promote its active use and benefits.
- Support local employers to develop healthy workplaces for their employees. Utilise already existing organisations that form part of the Health and Wellbeing Board to demonstrate best practice, motivation and the benefits.
- Promote initiatives that address worklessness, especially for people who are disabled and 18-25 year olds.
- Take a strategic, multi-agency approach to premises for delivery of health and social care services, including using the opportunities of the development of new primary care provision on the East and West flanks to provide a wider range of services to promote health and well being.
- Enable an integrated approach to Social Value and Corporate Social Responsibility with links to local businesses.





Services/Support

- Interventions to improve the management of long term conditions such as smoking cessation, tailored activity programmes, extending support to self-care groups such as Breathe Easy for COPD, and increasing the availability of education and training.
- Increase access to high quality primary care services
- Increase access to treatment services for obesity.
- Invest in the promotion of physical health in people with serious mental health illness and incorporate increasing physical activity into advice relating to mild to moderate depression and long term conditions.
- Increase capacity of the intervention and brief advice of alcohol services across primary and secondary care.
- Increase access to psychological therapies in primary care and psychological support in secondary care.
- Develop a joint commissioning strategy for effective use of telehealth, telecare and online education and support.
- Promote personalisation and raise the profile of what is possible to tailor support to individuals.

What will change?

- Reduction in smoking prevalence.
- Fewer people with excess weight.
- Reduction in levels of alcohol drinking.
- Increased levels of physical activity.
- Increase uptake of NHS health checks and risk of cardiovascular disease reduced.
- Decrease in late diagnosis of HIV.
- Reduction in households who live in fuel poverty.
- People with mental health problems will have improved physical health.
- Improved satisfaction with access to primary care.
- Increased uptake of seasonal flu vaccination for those who are eligible.
- Reduction in avoidable emergency hospital admissions.
- Reduction in premature death
- Those communities with greater need will have access to community wellbeing plans.

Ageing Well: Improving Outcomes for Older People

The number of older people with health problems in our communities is increasing rapidly and currently includes 6,800 people with depression and 2,300 people with dementia.

What we need to do

Prevention

- In line with the requirements of the Care Act ensure a focus on the promotion of wellbeing and addressing the risks to this
- Support carers to maintain or improve their wellbeing.
- Increase access to falls and repeat fracture prevention services.
- Increase the uptake of seasonal flu vaccination for people aged 65 and over.
- Ensure older people are accessing counselling and talking therapy services for common mental health issues.
- Improve access to the public transport network to enable older people to travel around the city more easily.
- Reduce social isolation: Consider more flexible planning policies that are responsive to community wishes for more local facilities and opportunities to meet socially, taking into account the Localism Act.
- Develop a Supported Housing Strategy that will set out an approach to homes for life and supported living.
- Promote and enable digital inclusion so that older people are able to access information and support on-line.
- Promote and enable local access to opportunities to improve and maintain physical health such as walking groups and activities to improve strength and balance
- Support the rights of older people in relation to the rise in working age, including help for those who are made redundant



Services/Support

- Commission integrated health and social care services that support older people to remain independent and to meet the outcomes and goals they set themselves.
- Promote intermediate care services, focussing on prevention of avoidable admission to hospital or long term care and supporting hospital discharge.
- Develop additional community services that support people 24/7.
- Strengthen mental health services that are appropriate for older people.
- Ensure access to high quality dementia care for diagnosis, treatment and support services.
- Improve the quality of physical and mental health care in Care Homes so problems are recognised earlier and management is improved.
- Ensure the appropriate level of intervention is available at the right time to enable people to make the right decisions and plan for their future

What will change?

- An increase in the proportion of people aged 65 and over who will receive Flu vaccinations.
- Reduced demand on crisis services.
- Reduced hospital admissions for ambulatory sensitive conditions.
- More people able to live independently for longer with a better quality of life.
- Decrease in the number of emergency admissions for falls.
- Increase in diagnosis rates for dementia.

How will we know we are making a difference?

To support us continue to develop and implement our Health and Wellbeing Strategy it's essential that we monitor and evaluate the health and wellbeing outcomes throughout the process to ensure the measures put into place are having positive impacts on behaviours and work to make a difference in peoples' lives, to help the residents of Milton Keynes to live happier lives for longer.



Below is a table of health and wellbeing measures that are set out to monitor and inform our plans and strategy for 2015-2018.

Starting Well	Living Well	Ageing Well
<ul style="list-style-type: none"> ➤ Reduced likelihood of developing preventable mental health problems ➤ Reduced levels of childhood obesity and increased levels of physical activity ➤ Reduced hospital admissions for children and young people ➤ Reduced incidents of repeat domestic abuse ➤ Improved scores for Good level of Development at Foundation Stage ➤ The impact of the 'toxic trio' will be reduced ➤ Family homelessness will decrease 	<ul style="list-style-type: none"> ➤ Reduced smoking prevalence ➤ Increased uptake of NHS health checks ➤ Improved outcomes and reduced variation in clinical care for people with long term conditions ➤ Reduction in avoidable emergency hospital admissions ➤ Decrease in late diagnosis of cancer ➤ Improved satisfaction with access to primary care ➤ Fewer people with excess weight ➤ Less households will live in fuel poverty ➤ Levels of physical activity will increase ➤ Decrease in late diagnosis of HIV ➤ People with mental health problems will have improved physical health. ➤ Number of community wellbeing plans 	<ul style="list-style-type: none"> ➤ Flu vaccinations meet national targets ➤ Reduced demand on crisis services ➤ Reduced hospital admissions and A&E visits for ambulatory sensitive conditions ➤ More people able to live independently for longer with a higher quality of life ➤ Improved support to carers ➤ An increase in the proportion of people aged 65 and over will receive Flu vaccinations ➤ Decrease in the number of emergency admissions for falls ➤ Increase in diagnosis rates for dementia ➤ Reduction in the number of premature deaths

Summary

Our strategy sets out the key priorities to support us in the development and delivery of the Health and Wellbeing Strategy for 2015-2018.

The joint approach to tackle the key health and wellbeing priorities for our residents will allow us to sustain a robust implementation plan with the main focus to increase levels of health and wellbeing for the population of Milton Keynes.

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