

Joint Health and Wellbeing Strategy 2018-2028

Measurement of success and prioritisation

Measuring Success

Lifelong
WELLBEING


Our ten year health and wellbeing strategy

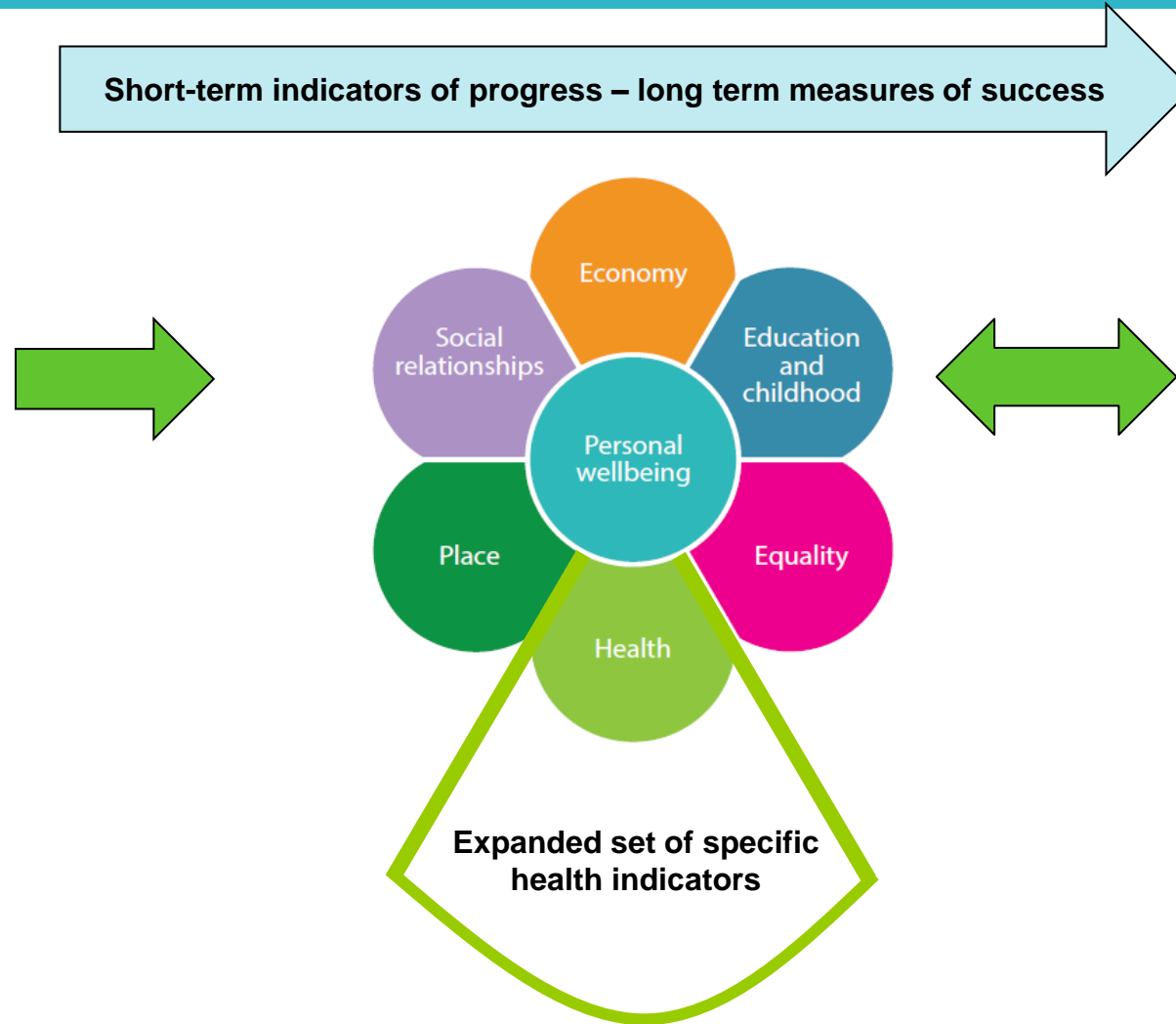
Staying Well
a strong focus on prevention

Closing the Gap
reducing inequalities in life chances

One MK
an integrated, innovative approach to health and wellbeing

2018

 milton keynes



Reporting

- Annual reporting
- By exception

Measures link to other local plans and monitoring processes

- E.g. ICS MK Place Plan, council plan, LMS
- Allows updating with more recent local data where available
- Provides better triangulation, insight and challenge

Example: Starting Well

Starting WELL

What we know

The first 1,001 days from conception to age two is crucial for lifelong wellbeing. Families are the most important influence on a child in the early years.

Good emotional health and wellbeing improves a person's life chances. Over half of all mental illness starts before the age of 14 years and 75% develops by the mid-20s.

Adverse childhood experiences (such as a parent's substance misuse, social deprivation, or abuse) can mean poor health and social outcomes in later life.

Priorities

SW1 Stop all forms of abuse, including neglect and address the impact it has on children and young people

SW2 Help children and young people to better mental health

SW3 Prevent smaller problems from escalating and needing specialist social care and health services

SW4 Make it easier for children and young people to eat well and become more active

SW5 Improve the life chances of children and young people with special educational needs and disabilities

SW6 Promote access to green spaces and public transport for children and young people

SW7 Support the wellbeing of all pregnant women

Areas to focus on

- 2,000 children are supported by social care at any one time
- Almost one in ten 5-16 year olds have mental health issues
- More than one in ten children are obese
- One in five children living in poverty
- Higher than average infant mortality per 1,000 live births

Measures/ indicators will not necessarily map directly to each priority as many issues interlinking

Long-term	Indicators
↑	Infant mortality
	Estimated prevalence of mental health disorders in children and young people: % population aged 5-16
	Child subjective wellbeing
	School Readiness: the percentage of children achieving a good level of development at the end of reception
	16-17 not in education, employment or training or whose activity is not known
	% Using natural environment for health and exercise
	% Children with excess weight Year R
	% Children with excess weight Year 6
	Smoking status at time of delivery
	Admissions for self-harm (10-24)
Short/mid term	Domestic abuse incidents
	Repeat rate of domestic abuse
	Under 18 conceptions per 1000 females
	First time entrants to the youth justice system
	Family homelessness
	Learning disabilities: % eligible with an annual health check (14+)
	Children in care immunisations
	Paediatric non-elective admissions 0-19
	Paediatric non-elective admissions 0-4 for respiratory admissions

Examples of system link with detailed overview

↔ LMS Strategic Board

↔ LTP / Mental Health Crisis Care Concordat

↔ MK Integration Board/ Place Plan

Starting Well										
KPI Description	Frequency	Time Period	Key	Higher wellbeing linked with	Rank (among similar LA)	Trend	MK Baseline	IMD comparators mean (and range)	England Mean (and range)	Eng. 95th Centile
Infant mortality	Yearly	2014/16	Crude Rate per 1,000	A lower number ↓	13th/16	↘	4.3	3.5 (2.4 - 5.6)	3.9 (0.93 - 8.23)	2.1

Priorities for Year One

Starting Well

- SW2 Help children and young people to better mental health
- SW3 Prevent smaller problems from escalating and needing specialist social care and health services

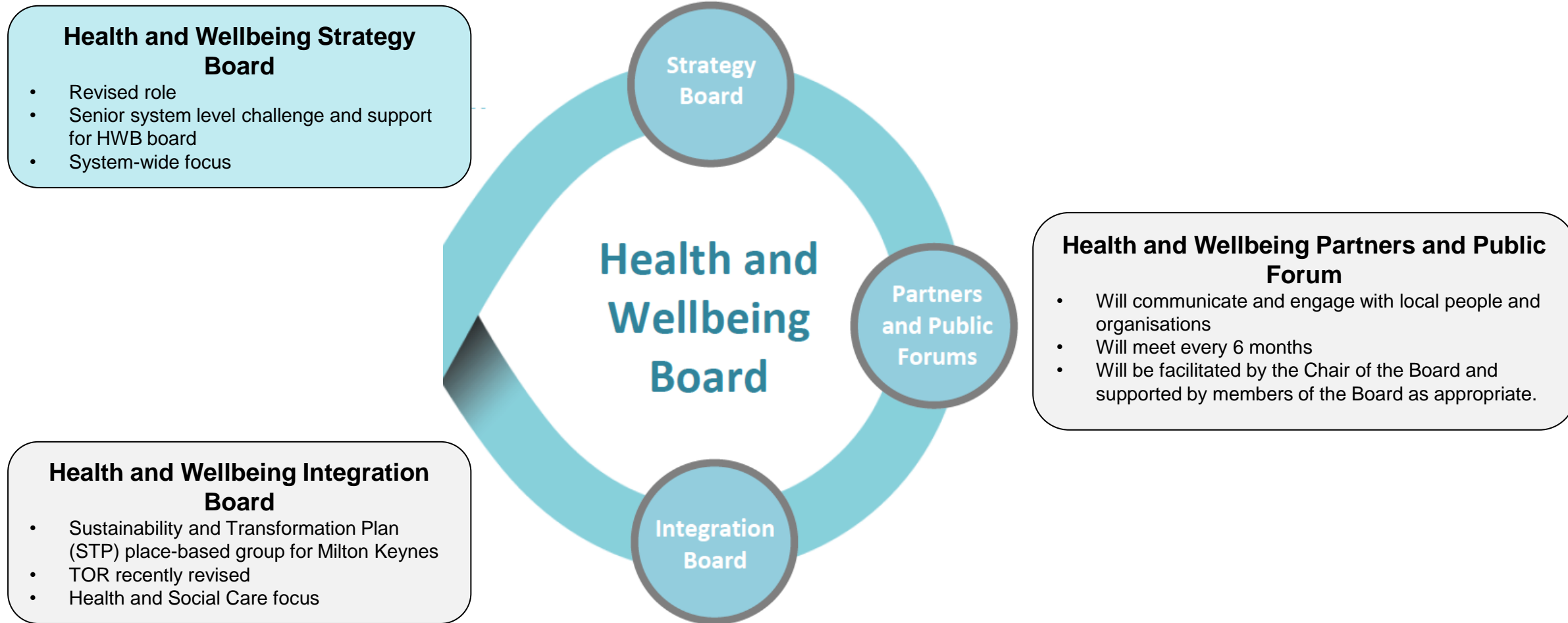
Living Well

- LW2 Improve the lives of everyone living with mental illness through raised awareness and more effective support services
- LW4 Tackle the number of rough sleepers and the rise of households in temporary accommodation and reduce low quality housing
- LW5 Improve the detection and management of long term conditions

Ageing Well

- AW3 Develop high quality out of hospital services to reduce the need for hospital admission and get people home safely and quickly
- AW6 Promote positive mental health and reduce social isolation through strengthening social support and social networks

Delivering Year One Priorities: Structures



HWB Board working group revision to provide **challenge** and enable **change** across the system

Delivering Year One Priorities: Next steps

- Organisations to ensure inclusion of priorities within existing workplans
- Identifying where there are system gaps and opportunities for change
 - Children's system workshop
 - Mental health needs assessment
- Strategy board development