

# HEALTH & WELLBEING STRATEGY REFRESH

2024-2028

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South Cambridgeshire is one of the least deprived Districts in England, ranked 301/317 districts (ONS, 2021). Many residents lead healthy and prosperous lives, however, there are also many people who face challenges. There are numerous factors which can affect this, such as the lived environment, housing security and affordability, access to services, amenities and education, and financial income which in turn can influence lifestyle choices and health and wellbeing outcomes.

Policies at a national, county, and local level play an important role and by implementing strategies which target specific health challenges, there is an opportunity for the District Council to influence longevity and the length of time spent in good health.

## Strategy refresh

The original Health & Wellbeing Strategy was developed in July 2019 prior to the Covid-19 pandemic, prior to the Health and Care Act July 2022 (which saw the formation of 42 Integrated Care Systems across England) and prior to the cost-of-living crisis, and it no longer reflects the environment in which we now live, work and age.

The Covid Pandemic created greater inequalities in education, jobs, living standards, mental health and wealth in the UK. In a report published by the [Institute for Fiscal Studies](#) (IFS) the gap between the best and worst off has widened considerably, most notably affecting those already in marginalised groups. The restrictions designed to mitigate the spread of the virus negatively influenced mental health and wellbeing, and for those with pre-existing poor mental health, this was exacerbated.

Throughout 2022 and early 2023 there were sharp rises in inflation and energy prices creating sharp falls in household living standards at a time when families were still recovering from the knock-backs created by the Covid-19 pandemic. Inflation hit lower-income households harder, with increasing food, gas and electricity prices absorbing a greater portion of their income.

In July 2022 the Cambridgeshire and Peterborough Integrated Care System (CPICS) was formed to which all partners in health, social care, local authority and the voluntary sector became signatories. From this, a [Joint Health and Wellbeing Integrated Care Strategy](#) was published for the County (December, 2022) which agreed 3 main shared goals:

- increase the number of years people spend in good health
- reduce inequalities in preventable deaths before the age of 75
- achieve better outcomes for our children

To achieve these goals, 4 core priorities were identified, which commit partners to:

- a. ensuring our children are ready to enter education and exit, prepared for the next phase of their lives.
- b. creating an environment that gives people the opportunities to be as healthy as they can be
- c. reducing poverty through better housing, employment and skills
- d. promoting early intervention and prevention measures to improve mental health and wellbeing

The services we deliver have also adjusted in response to the changing environmental and economic conditions outlined above and as a result a refresh of the SCDC Health & Wellbeing strategy has been undertaken to reflect the wider environmental and economic context, and the need for synergy with our partners in the delivery of our services.

## Foreword

*Written by Bridget Smith, Leader South Cambridgeshire District Council*

*The importance of the role played by District Councils in ensuring people live healthy lives in decent homes with access to clean air and open spaces is becoming ever more apparent.*

*It is District Councils that can stop things going wrong. We have huge influence on public health and preventative services through our teams in housing, planning, economic development, welfare, leisure and environmental health. We take every opportunity to tackle the root cause of poor health to reduce the burden on the NHS and social care system. Some things we can do alone and much else we must do in partnership with both the statutory and voluntary sectors.*

*Our work to tackle the cost-of-living crisis is a great example and continues to be critical as energy costs and inflation remain high. Reducing the cost of people's heating bills by giving people electric blankets, encouraging them to eat warm food by using slow cookers, by providing Warm Hubs which support physical and mental wellbeing and through mobile warden schemes which focus on keeping people happy and healthy in their own homes.*

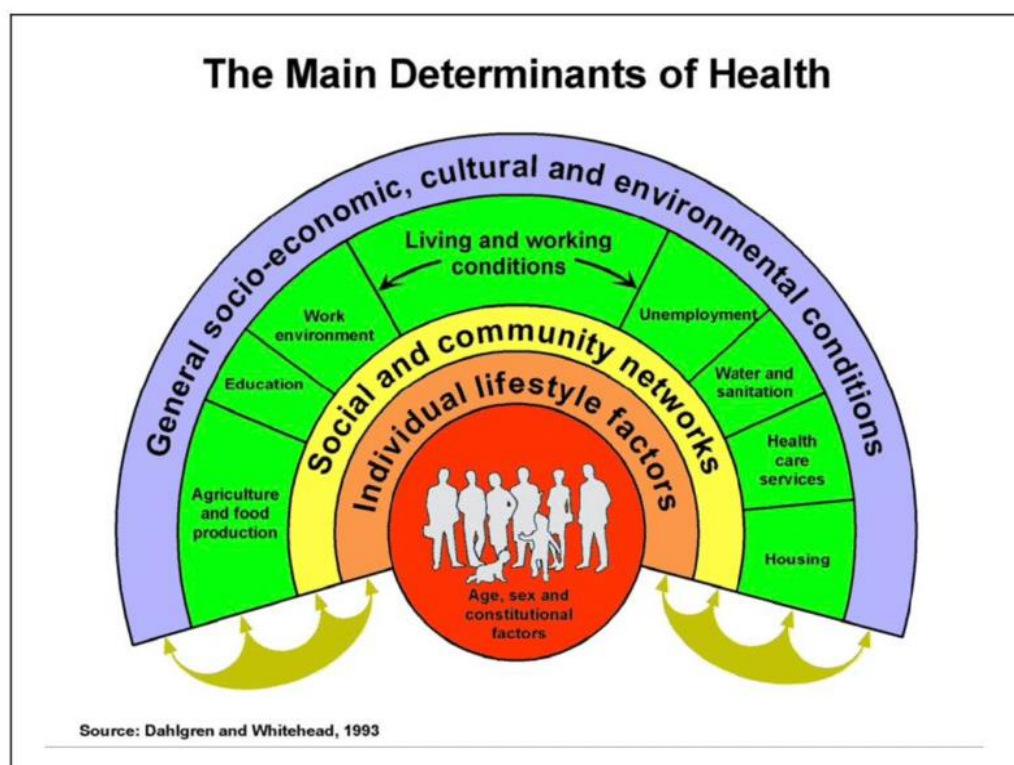
But it's not all about older people. Health and wellbeing impacts on our economic success too. We know that poor education and poor health negatively affects productivity and by providing our young with aspirations to fulfil their potential regardless of socio-economic background we deliver better outcomes for the individual and society.

We are fully committed to maximising the role of South Cambridgeshire District Council in the prevention of ill health and the promotion of good health for every one of our residents.

## Introduction

Our health and wellbeing is an outcome of the circumstances in which we are born, grow, live and work and the personal and social connections we make along the way<sup>(1)</sup>. These wider environmental and social factors influence our ability to flourish and do well and make the most of the opportunities that are presented to us throughout life, making for a compelling case that responsibility for the health of the public goes beyond the health and social care system. Illustrated clearly in figure 1, The Main Determinants of Health by Dahlgren & Whitehead, 1991)

Figure 1



South Cambridgeshire is already a great place to live, work, grow and prosper, in fact it's one of the least deprived Districts nationally, where people on the whole consider themselves to be well and have lower levels of chronic illness and obesity than is seen in other parts of the County and nationally. However, the District faces the challenge of high economic growth coupled with an increasing number of older people more of whom will need physical and financial support, and fewer people of working age able to fund services. It is therefore an imperative that as a population we retain good health into older age not only to ensure we can work productively until retirement but to enjoy a good quality of life and to continue to contribute to society well into retirement.

The Council is, therefore, committed to continuing to improve health outcomes for all residents by focusing on these wider determinants of health. We hope that by taking a holistic, long-term approach, we will deliver sustained interventions which help our residents start well and live well, regardless of who they are, where they live or how much they earn.

The District Council has identified its health and wellbeing priorities to support delivery of our business plan, using data from [Cambridgeshire Insight](#). A shared knowledge base bringing

together data from a wide range of sources, to identify local needs and views in order to support local strategy and service planning.

The priorities of the CPICS Integrated Health Care Strategy have also been incorporated into this Health and Wellbeing Strategy. Appendix B illustrates how the projects delivered by SCDC meet the 4 priorities outlined by CPICS Strategy and demonstrates how we are working to deliver our mutual goals.

There are other delivery partners working on a range of South Cambridgeshire based projects which will deliver health and wellbeing outcomes for its residents, such as the Greater Cambridge Partnership (GCP), the Cambridgeshire and Peterborough Combined Authority (CPCA), CPICS, Cambridgeshire County Council and the Voluntary Sector. However, these projects will not be monitored within the scope of our action plan.

## The Business Plan

The Business plan 2020-2025 focuses on 4 key areas of priority:

### **1. Growing local businesses and economies**

Good health and wellbeing are fundamental to support a thriving economy. Security of income is fundamental to good health and wellbeing. Both enable individuals and families to plan for their future, pay for the necessities and have income left over to secure an enhanced quality of life. In the face of high economic and housing growth, the Council's aim will be to at least maintain our excellent current levels of air quality and health and wellbeing.

### **2. Housing that is truly affordable for everyone to live in**

Having a secure, affordable home in which to live and raise a family with easy access to all services and amenities is another key determinant of good health; stable and affordable housing supports mental health by limiting stressors related to financial burden, long commutes and moving frequently. Within these priorities there is a firm commitment to encourage more people to participate in active and healthy lifestyles.

### **3. Being Green to our core**

Reducing emissions of greenhouse gases through improved transport, energy efficient housing stock, food and energy-use choices can result in improved physical and mental health. The more homes and workplaces the district hosts the more important this is, especially around air quality; this will be mitigated for example through well-designed communities, improving access to green space and increased tree planting in every parish.

### **4. A modern and caring council**

Supporting local community and voluntary groups and local businesses to help carry out projects which benefit people and the community, especially the most vulnerable; to enhance sustainable, healthy, connected communities.

### The national context

In 2023 there were unprecedented pressures on health and social care services and widening inequalities resulting from the Covid-19 pandemic. There is a growing burden of mental illness, and rapid growth of the ageing population, relative to the working-age population. Health inequalities persist, particularly for preventable illnesses and meeting these challenges will mean a greater focus is needed on the promotion of health and prevention of disease.

As a District Council we are members of Cambridgeshire and Peterborough Integrated Care System (CPICS). Our collective focus is “*All together for healthier futures – working to improve the health and wellbeing of our local people throughout their lives*”.

For the first time, all organisations involved in keeping people healthy and well are working towards the same priorities together. This includes health organisations, local authorities, voluntary, community and social enterprises, and representatives from the wider community.

The health needs of populations vary across the Country, and in fact the County. People living in Peterborough will have very different needs to those living in Cambridge who will have very different needs to those living in South Cambridgeshire for example Cambridge, a densely populated urban environment, well served with public transport is made up of 75% 15-64 year olds, with a very high number of young people aged 20-34 years and only 11% of the population aged 65+. In contrast to South Cambridgeshire, a rural district made up of 106 individual parishes, poorly served by public transport and limited access to amenities, where 62% of the population is made up of 16-64 year olds and a larger proportion of the population (20%) aged 65+.

To help address these differences, CPICS has been split into two ‘places’: North and South.

North: Peterborough, Huntingdonshire and Fenland (pop: 575,000)

South: Cambridge, East Cambridgeshire and South Cambridgeshire (pop: 375,000)

One of the core principles of CPICS is that care should be delivered as close to a person’s home as possible. To address this each ‘place’ has been divided into Integrated Neighbourhood Teams (INTs). These are clusters of GP practices (Primary Care Networks or PCNs) within a given locality working together with local authorities and the voluntary sector to address the needs of the population at a hyper-local level.

In South Cambridgeshire there are three Integrated Neighbourhood teams which include most of our GP practices. These are as follows:

- ⇒ **Granta PCN:** Shelford, Sawston, Linton, Barley and Royston Surgeries in Hertfordshire
- ⇒ **Meridian PCN:** Harston, Comberton, Monkfield (Cambourne), Bourn, Orchard (Royston), Royston and Roysia surgeries
- ⇒ **Cambridge North Villages PCN:** Firs House (Histon), Milton, Willingham, Over, Cottenham, Swavesey, Maple (Bar Hill) and Waterbeach (and planned Northstowe) Surgeries
- ⇒ Papworth Surgery is part of the Huntingdon Central PCN
- ⇒ Greensands Medical Practice (Gamlingay) is part of a Bedfordshire PCN

Where a surgery is connected to a PCN outside of South Cambridgeshire, they will follow the health priorities of that particular PCN.

Much of the work we do as a District Council is already aligned to the priorities set out in the CPICS Integrated Health and Care Strategy. This is demonstrated within Appendix B, attached.

There is a greater need for closer collaboration amongst partner organisations, and with the formation of the CPICS, this is now being achieved.

## Lessons learned from Covid-19 Pandemic

In March 2019 the country was faced with the challenges presented by the Covid-19 pandemic. In a very short space of time, SCDC had re-organised almost its entire staffing resource with the aim of supporting residents, communities and the NHS. Our approach was to reach out to community groups as a facilitator and enabler to offer support and guidance to residents, and to let the community groups and volunteers lead local support activity. The result was support to residents at a hyper-local level. From SCDC's perspective it is important to understand what worked well and what lessons we can learn from delivering a project at scale, at short notice and where the national guidance was changing on a daily basis. (Appendix C contains a brief summary of our approach within Communities).

## Climate change and health

Climate change is linked to health in multiple ways. Excess heat places additional pressure on the heart, brain and lungs, increasing the risk of death from circulatory diseases such as heart attack and stroke. The elderly and the very young are at greater risk of dehydration. There is also significantly greater risk to those who work outdoors with longer exposure to extreme heat, cold or flooding. As a Council we are taking proactive measures to ensure we lead from the front as well as introduce initiatives and community projects to facilitate local action. Our [Zero Carbon Strategy](#) brings together our plan to reduce carbon emissions.



## An evidence based strategy

The health and wellbeing activities undertaken by the Council are evidence based and collaborative. To do this, data is referenced from [Cambridgeshire Insight](#).

## Overview of South Cambridgeshire

Beyond the Covid-19 pandemic, the broader health issues specific to South Cambridgeshire have not altered since 2019:

- Demand for health and education services will continue to increase significantly as a result of the particularly strong local housing growth and the general aging of the population.
- The Census 2021 illustrates the increase in population of South Cambridgeshire from around 148,800 in 2011 to 162,000 in 2021 an increase of 8.9%.
- South Cambridgeshire is predicted to have the highest level of growth in absolute numbers and proportional growth of any Cambridgeshire district between 2016-2036. With the population forecast to rise to 200,480 by 2036.
- Recent growth has primarily been driven by natural change, rather than migration. However, our planned new housing sites and the numbers of dwellings expected in South Cambridgeshire also contribute to the expected population growth.
- In South Cambridgeshire, as with most Cambridgeshire districts, the White British group comprises around 90% of the population. Travellers represent 0.4% of the population and have some of the poorest health outcomes. And migrants and asylum seekers make up 0.2% of the population.
- The proportion of people from the Asian: Indian/Pakistani/ Bangladeshi group in South Cambridgeshire is smaller than the proportion found nationally (5.8% compared to 9.6%).
- The population has also continued to age, with an increase of 28.7% in people aged 65 years and over within the district in 2021.
- The greatest population growth is expected in the over 75 age group across Cambridgeshire. People aged 90+ is predicted to increase by 137% by 2036.
- South Cambridgeshire has a significantly higher birth rate than the Cambridgeshire average due in part to the number of new communities which attract young and growing families.
- South Cambridgeshire is a rural district made up of 106 parishes, which are poorly served by public transport.
- The high cost of housing in South Cambridgeshire means that young families and individuals are at greater risk of housing poverty.
- South Cambridgeshire is markedly the least deprived district in Cambridgeshire, and none of its population live in the most deprived fifth (20%) of areas nationally. Although deprivation does exist across the District, it is dispersed within smaller communities and largely hidden.

- Where poverty does exist the percentage of children achieving a good level of development at the end of reception is significantly worse than the England average for local children with free school meal status
- South Cambridgeshire's educational attainment and employment rates are statistically significantly better than the England average.
- However, the number of people economically inactive has risen to 34.8% in 2021 from 23.8% in 2011 (largely attributed to growth in the numbers of people retiring).
- Health outcomes in South Cambridgeshire are broadly very good and often statistically significantly better than national averages.
- Cambridgeshire has high levels of hospital admissions among 10-24 year olds due to self-harm (almost twice as high as reported across the East of England and 1.5 times higher than found nationally).
- In South Cambridgeshire approximately a quarter of adults are physically inactive, not meeting the recommended 150 minutes of moderate intensity activity each week.
- Over half of all adults across the district are classified as overweight or obese.

## South Cambridgeshire Priorities

The preceding SCDC Health and Wellbeing Strategy highlighted 4 priority areas, outlined below. These are now aligned to the CPICS priorities to create greater synergy. The activities we are undertaking to address them are outlined in appendix B.

### 1. Children and Young People

Aligned to CPICS priority 1: Helping Children to enter/exit education prepared for the next stage of their lives

- Promote inclusive activity for children
- Support vulnerable families with children
- Early identification of children at risk

### 2. Healthy Behaviours and Lifestyles

Aligned to CPICS priority 2: Create environments to give people the opportunity to be as healthy as they can be and

Aligned to CPICS priority 3: Reducing poverty through housing, employment and skills

- Promote activity for the aging population
- Design health and wellbeing into our strategic sites e.g access to green space, and opportunities for active travel
- Provide opportunities to help people manage their weight
- Deliver a range of healthy lifestyle interventions for all ages
- Support residents facing food, fuel poverty and homelessness
- Deliver improved air quality
- Deliver a range of support to help people into high quality employment

### 3. Mental Health

Aligned to CPICS priority 4: Promote early intervention to improve mental health and wellbeing)

- Actively building community cohesion in our strategic sites
- Plan environments which promote positive mental wellbeing
- Early identification of risk signs and counselling service provision to people and families at risk
- Address isolation and loneliness across all age groups, within new communities as a key priority
- Timely delivery of community facilities which help bring people of all ages together.

#### **4. Ageing Well**

Aligned to CPICS priority 2: Create environments to give people the opportunity to be as healthy as they can be.

- Support elderly residents to live independently at home
- Invest in services to reduce loneliness and isolation
- Use opportunities to educate as a means to prevent ill-health
- Ensure provision of suitable housing choice for aging population
- Plan inclusive environments which enable residents to age well

To demonstrate more precisely how we will work as a partner within CPICS to meet the priorities set out in the Integrated Health Care Strategy and our own strategic priorities and objectives, all the activities and actions are outlined in Appendix B and grouped under the four ICS priority headings to illustrate how our approaches are aligned.

Some of the objectives are delivered directly; others are delivered indirectly or in partnership, with SCDC providing funding or capability to other organisations.

It is important to note that the Healthy Behaviours and Lifestyles Contract funded by Public Health delivers a 3-tier service for residents.

Tier 1; Delivered by the District Councils. Healthy You, lifestyles programme. A first line intervention for adults wishing to pursue light activity such as health walks.

Tier-2 is delivered by Everyone Health, which includes weight management, health coaching, stop smoking and alcohol reduction interventions.

Tier-3 a more intense weight management support provided by Cambridge University Hospital.

## **How we will measure success**

An effective public health approach recognises that it is only through actively working together on these many factors, that we can make inroads into improving health for the whole population<sup>1</sup>. Actions will need to be monitored and outcomes evaluated where possible, using a range of methods. By evidencing these broader benefits, we can begin to highlight the impacts our activities have on measures such as falls reductions in the elderly, or early discharge or delayed hospital admissions. However, changes to population health often take many years to achieve. Therefore, it is important to recognise that whilst we cannot directly influence individual health outcomes, we can make a significant positive contribution to health and wellbeing at a population level through the actions outlined in the strategy.

## Conclusions

This Strategy aims to address the Health and Wellbeing needs of a population who on the whole report good health but where there is continuing high housing growth and ambitious economic growth in the face of an increasingly ageing population where more people will need physical and financial support, with fewer people of working age able to fund services. The role we play in the wider determinants of health will ensure our populations are physically and mentally fit and therefore more resilient in the face of any future pandemics; contribute to, and benefit from, the economic growth across the region; and continue to positively contribute to society and live full lives well beyond retirement. Providing for health and wellbeing is an essential element to place making, building strong and resilient communities engaged in addressing wider environmental challenges; and is complementary to a supportive built environment designed to promote health and wellbeing.

The health priorities for this Council will be to promote optimum health through the wider determinants where we can use our influence. Health cannot be achieved alone through the built environment; spaces need to be animated and activities supported by the Council. Providing the opportunities for young people to participate in activity acts to embed activity into their lifestyles at the outset which stays with them as they mature and grow; so being active becomes part of their lifestyle. Helping adults to regain activity helps demonstrate a good role model to young people and helps to create a culture of physical activity. A holistic approach to health and wellbeing is required to maximise every opportunity available to influence, support and encourage health and wellbeing leading to a virtuous circle of mutually reinforcing interventions.

## References

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