

**Lancashire Health and Wellbeing Board**

Meeting to be held on Tuesday, 5 September 2023

**Corporate Priorities:**  
Delivering better services;

**Health and Wellbeing Board Key Priorities - Progress Update**

(Appendices 'A', 'B' and 'C' refer)

Contact for further information:

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**Brief Summary**

The report provides an update on work to address the three key Board priorities:

- Best Start in Life
- Healthy Hearts
- Happier Minds

An update on the associated milestones and performance is provided (Appendix 'A'). Further detail regarding the update of early education funded places is also provided (Appendix 'B'); together with details of the Tobacco Free Lancashire and South Cumbria Strategy 2023-2028 (Appendix 'C').

**Recommendations**

The Health and Wellbeing Board is asked to:

- i) Consider the performance update and endorse the areas identified as opportunities for collaboration and advocacy of the Board.
- ii) Endorse the Tobacco Free Lancashire and South Cumbria Strategy 2023-2028, and it's four key priorities (Appendix 'C').

## Detail

The [Health and Wellbeing Board](#) meeting of 24 January 2023 received a performance update against the three priorities:

- Best Start in Life
- Healthy Hearts
- Happier Minds

This report is provided as a further update on activity and progress to date, including performance metrics, forward look and opportunities for improvement/further collaboration.

### 1. Best Start in Life

#### 1.1 Background

Best start in life has been recognised by the Health and Wellbeing Board and the Children and Young People and Families Partnership as a key strategic priority area.

As previously highlighted inequalities exist which strengthens the case for having a focus on giving children the very best start and improving outcomes for babies, children, and their families.

#### 1.2 Performance Review (Appendix 'A')

##### Reduction in infant Mortality (Per 1000)

- The number of infant deaths in Lancashire for 2019-2021 is 127 (3.5 per 1000) compared to 137 (3.8) previously. This is similar to the England rate (3.9) and NW (North West) Region (4.4). We have achieved the target set for 5% reduction by 2025.
- However, local variations exist where infant mortality rates from 2011-2021 are significantly higher in 20% most deprived areas – highest in Burnley (7.0) and Rossendale (4.4). Number of deaths are significantly higher in 20% most deprived areas (285) than 20% least deprived areas (42).

##### Reduce Smoking at time of delivery

- In 2017, the government set a target to reduce rates of maternal smoking to 6% by 2022. The Lancashire rate for smoking at time of delivery is 12.7%, which is above NW (10.6%) and England (9.1%). However, based on the most recent 5 years this position is improving.
- Districts that have higher rates than NW & England include Hyndburn, Burnley, Pendle, Rossendale (all 15.1%), West Lancs 11.4%, Fylde 11.3%, Wyre 11.2%
- Only Lancaster (6.6%) is lower than NW & England.



## **Reduce low birth weight of term babies**

- In 2020 there were 334 (3.1%) low birth weight term babies compared to 2.9% in England. Updated data for 2021 shows this is 320 (2.9%) compared to 2.8% in England. This means the target to reach 2.9% by 2025 has been achieved.
- Inequalities and variations exist, rates are higher than NW Region and England in Preston (4.5%) Burnley (4.1%), Pendle (3.8%), South Ribble (3.3%), & Hyndburn (2.9%). Rates are better than NW & England in Rossendale (2.6%), Lancaster (2.5%), Ribble Valley (2.4%), Wyre (2.1%), West Lancs (1.9%), Chorley (1.8%), Fylde (1.6%).

## **Reduce Under 18 Conception rate**

- In 2017 the Lancashire's rate was 22.9 per 1,000 (436 girls becoming pregnant). In the NW region this was 21.9 and England 17.8. In 2021 the teenage pregnancy rate remains worse than England, with 323 (15.5 per 1000) girls becoming pregnant in a year, compared to 16.4 in the NW region and 13.1 in England.
- Between 2017 and 2021 Lancashire overall rate has declined. Rates are higher than NW & England in Preston & Burnley (both 20.1), Chorley 19.4, Hyndburn 18.2. Rates are lower than NW and England in Wyre 12.5, Ribble Valley 10.3, Fylde 10.0.

## **Breastfeeding prevalence rates**

- Latest published data for 2021/22 shows a Lancashire count of 4563, but not rate (data quality issues). The England rate is 49.2%, with service level data estimating Lancashire at 38% in 2020/21 & 39% in 2022/23.
- Data from the commissioned Healthy Child provider, HCRG, for financial year 2022/23, shows higher % than England in Ribble Valley at 50.1%; and lower % than England for all other districts (lowest in Wyre 32.9%).

## **Children achieving a good level of development at the end of Reception**

- The percentage of children achieving a good level of development at the end of Reception in Lancashire was 62.1% compared to England average 65.2% in 2021/2022. This varied between boys (55.6%) and girls (69.1%).
- Significant inequalities and variations exist within Lancashire. Districts with higher than England average (65.2%) for all children include: Fylde 70%, Ribble Valley 69%. Districts lower than England include Preston 65%, Rossendale & Chorley 64%, Wyre & Lancaster 63%, South Ribble 62%, West Lancs 61%, Hyndburn 59%, Pendle 56%, Burnley 55%.
- Percentage of Children on Free School Meals (FSM) have lower averages, highest of which is Preston 53%, lowest of which in South Ribble 35%.

## **% of 5 years old with experience of visually obvious dental decay**

- Oral health is an integral part of overall health; when children are not healthy this affects their ability to learn, thrive and develop. Poor oral health is a priority under Best Start in Life and the most common cause of hospital admission for 5 to 9 year olds.



- Recent data for 2021/22 shows 27.4% experience dental decay. This is better than the NW region (30.6%) and worse than England 23.7%.
- Lancashire is worse than England and the NW Region in: Pendle 41.9%, Hyndburn 35.4%, Preston 32.6%.

### **Hospital admissions for dental caries (0-5 years) – per 100,000**

- For the period 2021/22: England rate for hospital admissions for dental caries was 201.7 per 100,000 and NW region was 311.6.
- Hospital admissions for dental caries (0-5) in Lancashire was 440.2 per 100,000 which is higher than both England and NW region.

### **Hospital admissions as a result of self-harm (10-14 yrs) – per 100,000**

- Lancs previously published (2020/21 – not currently available) showed rate of 345.5 compared to current rate (502.7) which is a significant increase (data is currently being revised).
- Latest period 2021/22: England rate 307.1 per 100,000, NW 437.9, Lancashire 502.7 is significantly higher than England rate.
- Lancashire rate is 2<sup>nd</sup> highest amongst our CIPFA (Chartered Institute of Public Finance and Accountancy) nearest neighbours and is one of 5 with rates above England average.

### **Hospital admissions as a result of self-harm (15-19 yrs)**

- Latest period 2021/22 England average rate 641.7 per 100,000, NW rate 663.9, Lancashire rate 472.3 which is lower than England & NW.

### **Early years take up of funded nursery places for 2, 3 and 4-year-olds**

- Please see (Appendix 'B').

## **1.3 Forward Look**

- The local priorities set out in our Best Start in Life programme include a focus on infant mortality, 1001 critical days, school readiness and adolescent mental health. These are also highlighted as a key priorities within the Lancashire Early Years Strategy.
- Giving children the Best Start in life is a key priority area within our 0-19 Public Health Nursing service. Having undertaken a service review we have developed a service model which recognises the needs identified by, staff, stakeholders and service users. These will be key as we recommission the service from April 2024.
- Having undertaken a recent survey for the Start for Life national team we have identified some gaps as well as good practice which we need to focus on in the coming year. This includes having a clear published start for life offer for our families locally and partnership working and collaboration with key partners as well as parents and carers. A visit is planned by the national team in November 2023.
- To continue to focus on the 1001 critical days including pregnancy and nutrition as well as reducing smoking in pregnancy in order to further improve these outcomes.



- To learn from the areas identified within the Child Death Overview Panel as well as ensure delivery of the priority areas identified within the Infant Mortality Action plan.
- To ensure effective commissioning of children's services to improve the outcomes and performance identified. A commissioning plan has been developed and includes 0-19 (25) public health nursing services as well as Peer support breastfeeding, Oral health, Vision screening and support for mental health in schools.
- Health needs assessments as well as undertaking a deep dive in relation to child suicides.

#### **1.4 Opportunities for Collaboration/Advocacy of the Board**

The Board is requested to continue its support to ensure:

- The outcomes and priority issues are embedded within Early Years and the Family Hubs model, including supporting an integrated approach to workforce, training, data, intelligence, development of pathways and parenting support across our services including health partners.
- There is commitment to joint commissioning and funding between the NHS Integrated Care Board, County Council and other relevant partners where appropriate, for example in relation to speech and language services and Looked after Children support.

## **2. Healthy Hearts**

### **2.1 Background**

Mindful of the impact that cardiovascular disease has on the residents of Lancashire, a Lancashire Healthy Hearts Programme was set up in Spring 2022. This was in line with the national Best Practice Framework (published by Public Health England and the Association of Directors of Public Health) encompassing the following seven thematic workstreams:

- i) Tobacco
- ii) Alcohol
- iii) Physical activity
- iv) Supporting healthy weight
- v) Food diet and nutrition
- vi) Health in all policies approach
- vii) Cardiovascular risk modification

In doing so we also crucially continue to recognise the interdependencies with the Lancashire and South Cumbria Integrated Care System's Cardiovascular Disease Prevention, Detection and Management Work Plan. This plan has a particular focus on delivering the NHS Long Term Plan around the three related risk factors for the development of cardiovascular disease, namely atrial fibrillation, hypertension, and high cholesterol.



## **2.2 Performance Review (Appendix 'A')**

Since the Healthy Hearts Programme was launched in March 2022, each thematic workstream has identified a series of high-level outcomes and drawn up individual thematic delivery plans in support of this. The past nine months has been a very productive period for the Healthy Hearts programme as the delivery plans have continued to be refined and key elements of delivery commenced. Appendix 'A' outlines a performance update of each of the relevant workstreams accordingly.

As part of our approach, recognising the central importance that the tobacco agenda has across the wider system, an overarching Tobacco Free Lancashire and South Cumbria Strategy (Appendix 'C') has now been developed and is crucially built around four key priorities:

- i) Working together as a system for a smoke free tomorrow
- ii) Action to address health inequalities
- iii) Making Smoke Free the new normal
- iv) Lancashire and South Cumbria - A United Voice against tobacco harm

An additional separate priority has also been identified around vaping and supports the need for consensus and clarity on the Lancashire and South Cumbria position on nicotine vapes and this strategy will be pivotal in strengthening our position in this key area.

## **2.3 Forward Look**

Over the next six-month period we will:

- Further develop our implementation approach for the underlying eight workstreams that relate to the Healthy Hearts Programme.
- Establish a Tobacco Free Steering Group across the 12 districts of Lancashire to support the local implementation of the Tobacco Free Strategy.
- Engage with our district councils and wider partners in implementing the healthy weight declaration and promoting physical activity.
- Continue to monitor the outcomes associated with the programme so that we can continue to feedback to this Board on an ongoing basis.

## **2.4 Opportunities for Collaboration/Advocacy of the Board**

This has been a very positive nine-month period for Healthy Hearts and key opportunities for collaboration include:

- The need to ensure that broader prevention approaches are further embedded in the work of emerging partnership/place-based boards as part of the Place Integration Deal.
- The importance of aligning resource allocation to this broader prevention agenda so that the appropriate level of assurance can be offered to the Health and Well Being Board regarding the implementation of the respective workstream delivery plans.



- Endorsement of the Tobacco Free Lancashire and South Cumbria Strategy 2023-2028 and its four key priorities as at Appendix 'C'.

### **3. Happier Minds**

#### **3.1 Background**

Our mental health and wellbeing through the whole life course is influenced by many components including social, economic and environmental factors.

The Happier Minds programme is a partnership and system leadership approach to addressing five key strands of work:

- Emotional health and self-care
- Loneliness and social isolation
- Dementia
- Alcohol and drug use
- Self-harm and suicide

#### **3.2 Performance Review (Appendix 'A')**

- In the Spring the public health team consulted with communities and targeted residents who had previously accessed a range of activities and services designed for people experiencing loneliness. The consultation was supported by partners, such as AgeUK Lancashire and we had over 100 responses. This was complemented by listening exercises and interviews with key partners including our districts and the voluntary, community, faith and social enterprise sectors across Lancashire. We found that there is a plethora of activities across the county, although not everyone is fully aware of what is available and there was a general lack of the sense of community and feeling belonged to the local community. Since the consultation we continue to work with voluntary, community, faith and social enterprise sector to develop directories of local activities (working closely with Adult Social Service and partners), the team with partners are hosting age of inspiration events, which brings and connect communities together, joins up local opportunities and promotes the five ways to wellbeing.
- Lancashire County Council has a dementia strategy, with colleagues currently working with partners to develop an Integrated Care System (ICS) dementia strategy and associated action plan.
- The Lancashire Alcohol and Drug Partnership continues to develop and is working closely with the newly formed pan Lancashire alliance. Several subgroups have been formed/reconvened including prevention, criminal justice pathways, dual diagnosis, data and intelligence, drug related deaths and communication. The initial focuses for the prevention group is around drugs and driving with a campaign focused on young males driving under the influence. This campaign is working closely with other key partnerships including the road safety partnership and community safety partnership.
- On behalf of the partnership, the commissioned adult community treatment provider Inspire/CGL (Change Grow Live) has worked with people with lived experience to develop a hidden in plain sight campaign to reduce the stigma



around alcohol and empowering people to get the help they deserve. The documentary can be found here: [Hidden In Plain Sight Documentary - YouTube.](#)

- In July a research proposal was submitted to the National Institute of Health and Care Research following the invitation to bid for the “innovation fund to reduce demand for illicit substances”. The research was following the incident in May 2023 where three young people in Lancashire were taken to hospital after vaping illicit substances. Intelligence shows an associated increasing trend amongst young people. To explore this further the research is to review the nature and extent of young people's use of illicit substances in vapes in Lancashire and to co-design and co-evaluation of behavioural interventions to prevent their use. Later this month, we will hear if we are successful for round two and if successful the research starts in May 2024.
- Work on drug related deaths continues and we have appointed a mortality lead on drug related deaths and a drug and alcohol lead within our provider. We have made progress to review historic drug related deaths and a drug related death panel has been formed, with the first meeting due to take place in September.
- The panel is being piloted in central Lancashire (with the highest rate) and then will be rolled out across the two remaining localities in Lancashire. To support the work of the drug related panel, we are obtaining a drug related database to allow all partners to update on their involvement with the person prior to their death.
- The Lancashire and South Cumbria Suicide Prevention Oversight Group has provided training to local media outlets on how to report suicide appropriately. During September partners are due to see a demonstration of Nexus (an intelligence platform) which will provide partners more capability to integrate and analyse data.
- Work continues on the draft Lancashire self-harm and suicide strategy, currently awaiting the outcome from the suicide audits taking place in September and October.
- On 9 November 2023 a partnership event is taking place in Preston to progress this work further and members of the Health and Wellbeing Board are welcome to attend too. At this event, the draft strategy will be outlined and workshops will be organised to develop the partnership action plan using the data and intelligence from a range of sources, which include the suicide audits.
- The key performance metrics relevant to Happier Minds:
  - Increasing the number of residents into treatment services for substance misuse (drug and alcohol)
  - Reducing the number of suicides
  - Reducing self-harm
  - Reducing drug related deaths
- Since the last update there is more recent data associated with self-harm, and rates have reduced. We are still awaiting local data to provide intelligence on the variance at ward and district level.
- There is no new published national data on suicide in Lancashire. Locally partners monitor data on suspected suicides through the Real Time Surveillance group (RTS) which indicate the rates are reducing. However formal reporting has not yet been finalised by the coroner.
- In 2022/23 the overall number of adults in treatment continued to increase with 6297 people supported by our treatment services against the Office for Health





Improvement and Disparities (OHID) target of 6330. Differences were observed within the substance types with the biggest increase in numbers in treatment for non-opiates. In 2023/24 the numbers in treatment have continued to increase with the biggest increases to date for non-opiates and alcohol. We are currently focussing on increasing the number of people in treatment for opiates, this has involved reviewing the pathways between prison and community treatment services to improve continuity of care and increased outreach and co-location with other organisations and services.

- Our adult community treatment provider has reported that in Q1 of 2023/24 they received a large increase in referrals compared to 2022/23, and we are expecting to see an increase in the number of people in treatment during Q2 as a result of the increased numbers referred.
- In 2022/23 the number of children and young people (under 18) in treatment exceeded our target of 204 set by OHID (Office for Health Improvements and Disparities). The numbers in treatment increase significantly from the historic low during Covid. In 2023/24 the number of children and young people in treatment has continued to increase and we have already exceeded our 23/24 target of 244 set by OHID (Office for Health Improvements and Disparities).
- We have received additional funding from OHID (Office for Health Improvements and Disparities) for 2023/24 and are expecting additional funding in 2024/25 to increase the capacity, quality and scope of our treatment and recovery system by, for example, employing dedicated recovery coordinators to work within the criminal justice system and community health care settings to improve pathways, increase the number of people coming into treatment and improving outcomes.

### 3.3 Forward Look

Over the next six to twelve months there are some stretching actions for Happier Minds as we strive to improve health outcomes, whilst remaining agile to respond to new policies and strategies. For example, the pending revised national suicide strategy due later in 2023 and the additional work from the implementation of the Lancashire self-harm and suicide strategy and action plan.

In June 2023, the agreed actions from the logic model of focus for 2023/24 were signed off by the Lancashire and South Cumbria Suicide Prevention Oversight Group.

The key areas of focus for 2023/24 include:

- Strengthening the support to the elected mental health champions
- Continuing to promote the orange button
- Providing media training all relevant agencies disclosing suicide related details to the public
- Improving the mental health pathways on discharge from prison (this work also includes drugs and alcohol)
- Joined up working on dual diagnosis and depression pathways
- Developing a community response plan for adults
- Reviewing the support for people bereaved by suicide by working with local primary care networks and others
- Review the approach for real time surveillance and monitoring of suspected suicides
- Expanding on data for locations for attempted suicides



- Explore interventions and expanding the wider intelligence to include self-harm data linking up with data from the Northwest ambulance service

The actions are stretching, and we will need partnership support in the delivery of the actions, especially when working across the system at pathways. Some of the actions will include working with new partners, for example, to look at depression pathways and work around attempted suicide. We will also work with current partners on new areas of work including scaling up the drug related death panels into the three localities across Lancashire and planning the drug related death conference.

We will also be reviewing our current approaches to increase referrals from a range of partners into the drug and alcohol treatment service.

It is also planned to strengthen our partnership working with academic institutions.

### **3.4 Opportunities for Collaboration/Advocacy of the Board**

Given no one organisation can tackle these extremely complex issues, the advocacy, support and accountability to the Health and Wellbeing Board is essential to continually drive this work forward.

## **4. Conclusion**

Partners and key stakeholders continue to work closely to ensure these priority areas are embedded within existing and emerging structures. Progress has been made, with the data showing some improvements, although it is recognised that challenges remain in reducing inequalities across Lancashire.

Opportunities to work in collaboration with health and social care and wider partners, utilising a preventive approach, remain key.

## **Appendices**

Appendices 'A'-'C' are attached to this report. For clarification it is summarised below and referenced at relevant points within this report.

<b>Appendix</b>	<b>Title</b>
Appendix 'A'	Performance Metrics
Appendix 'B'	School Readiness – Early Education Funded Places Uptake
Appendix 'C'	Tobacco Free Lancashire & South Cumbria Strategy 2023-2028

