

**Southend-on-Sea
Health and Wellbeing Strategy
2021 to 2024**

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Preface

Through consultation with a wide range of partners and stakeholders, I am delighted to introduce the Health and Wellbeing Strategy for Southend on Sea. The definition of health incorporates the various components of a person's mental and physical condition. Wellbeing is defined as a state of being comfortable, healthy and happy. This strategy will consider how we can influence the wider determinants of health and wellbeing, which includes the social, economic and environmental conditions that influence the health of individuals and populations. This strategy will address some of these causes over the next three years, as well as outline our priorities. Within our strategy, we describe the challenges we face, but also describe some of the opportunities too. We know that, within Southend, despite the challenges, our strong partnerships and commitment to working together means we are well placed to deliver sustainable, long-term improvements. Together, we will protect people and help them to live longer in good health.

Councillor Cheryl Nevin

Chair of Southend Health and Wellbeing Board

The implementation of the recent Physical Activity Strategy for Southend 2016 - 2021, has been instrumental in bringing partners together and in raising our approach to better support the local communities. However, it is clear that we have a lot more to do, hence a broader focus through this new strategy. When we think about good health, it is easy to think about our NHS and the care we get through hospitals and general practitioners. The NHS on its own cannot improve the health of the nation.

Furthermore, the combination of the increasing prevalence of complex health needs and increased demand is causing unsustainable pressures on the service, leaving the population without sufficient support to be more resilient. Cross sector commitment, which supports residents to take responsibility for their health and wellbeing is required. We must also acknowledge the ongoing financial pressures and the consequences of dealing with the coronavirus pandemic and life thereafter. In addition, we need to continue providing targeted health and wellbeing themes, for those most in need. We must change the culture, mobilise our collective leadership and work more effectively hand-in-hand with local communities, so better health outcomes can be achieved for the people of Southend. We have already made great strides in our collaboration in managing the pandemic and in the development of a shared health and wellbeing digital information, advice and guidance platform – Livewell Southend.

We can only make further in-roads, through our joint approach and commitment. Whilst partnering is crucial in delivering our vision, we have a responsibility to collaborate in delivering the NHS long-term strategy and the Southend 2050 outcomes, all informed by the Joint Strategic Needs Assessment (JSNA) and the Annual Public Health Report. To achieve the vision, our work will be to support the delivery under seven key priorities, as identified within this strategy. The alignment of organisational priorities and actions will serve to advance local service development and shared outcomes.

We hope that this Health and Wellbeing Strategy will generate a genuine sense of ownership as part of our collaboration to achieve a healthier Southend.

Krishna Ramkhelawon

Director of Public Health, Southend-on-Sea Borough Council

1: Vision

The unexpected arrival of the coronavirus pandemic has altered our ways of thinking and will have exacerbated the inequalities across our communities. This has sharpened our resolve to help with recovery and refocus our collective approach in supporting this mammoth task. From supporting enormous backlog in healthcare recovery, to reshaping the fragile care market, to the wider health and wellbeing recovery. Our vision needs to both embrace this recovery work whilst adapting to new ways of operating our 'business as usual':

- To support and enable the people of Southend to have the best possible physical and mental health, wellbeing and quality of life.
- To promote good healthcare, to enhance health and wellbeing across the life course: starting and developing well, living and working well, and, ageing well.

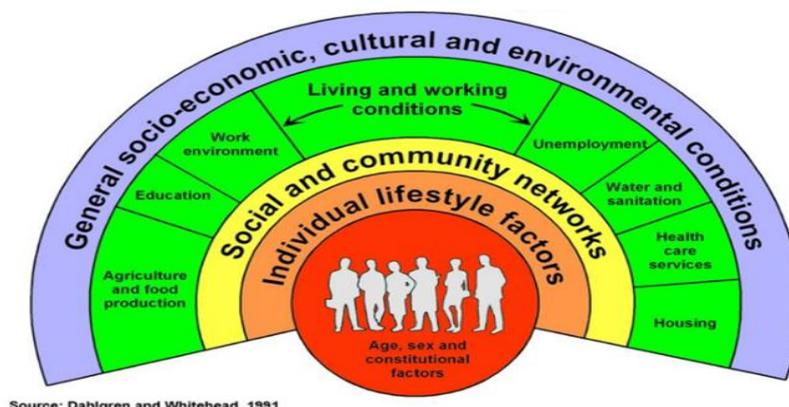
2: Outcomes

- Through good healthcare, to help people live longer and thrive in good health, for more years.
- To reduce health inequalities (including healthy life expectancy) between the most and least disadvantaged communities in the borough.
- For mental health and wellbeing to have the same priority as physical health.

3: Principles and ways of working

Delivering improvement in health and wellbeing requires us to consider the impact we can have collectively on the wider determinants of health:

Wider determinants of health



The following broad principles and ways of working underpin the delivery of this strategy:

- Life-course approach.
- Prevention and early intervention.
- Addressing social and health inequalities and the wider determinants.
- Promoting healthy lifestyles and self-care.
- Community and asset based approach with active community engagement and co-production - applying the Asset Based Community Development (ABCD) approach¹
- Place based approach - integration and partnership working to meet the unique needs of individual localities.
- For professionals to be fully trained, competent and understand the inequalities in health to address better outcomes for everyone.

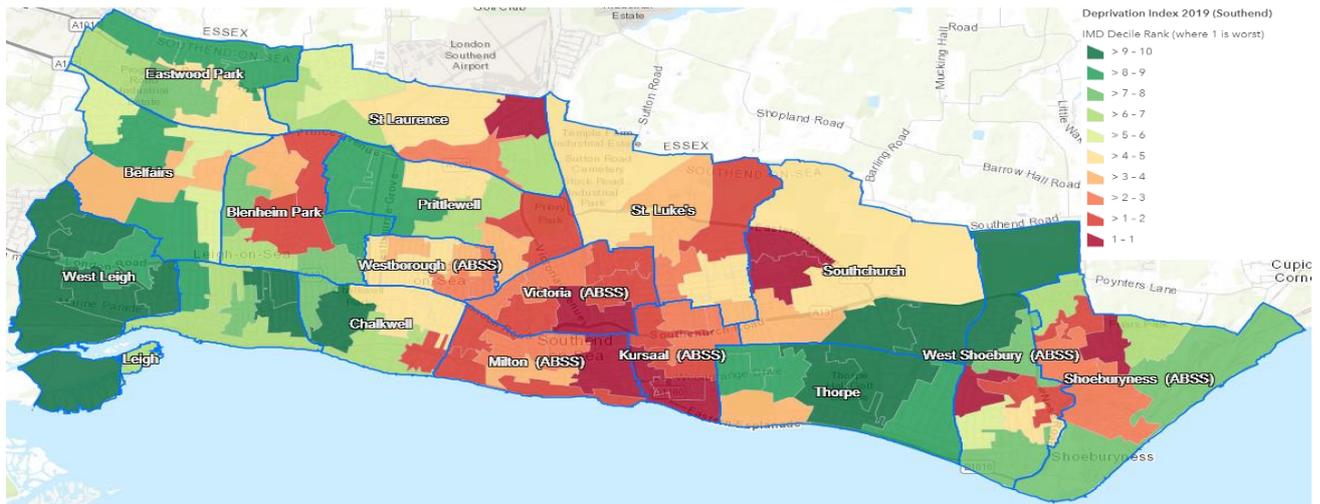
¹ What is asset-based community development (ABCD)? <https://sustainingcommunity.wordpress.com/2013/08/15/what-is-abcd/>

- Use of high quality data and evidence to support strategy and delivery – led by the local Population Health Management approach.
- Use of new technology.

4: **The Challenges**

Health inequalities

There are marked social and inequalities between different wards in the borough, which will be exacerbated by the unexpected coronavirus pandemic. Life expectancy is 10.5 years lower for men and 9.4 years lower for women in the most disadvantaged areas of Southend-on-Sea than in the least disadvantaged areas. This is significantly worse than the England average.² Areas marked in dark red are amongst the most 10% disadvantaged areas in England.



Maintaining an effective and sustainable health and social care system

NHS organisations working together, with their local partners, as an ‘Integrated Care System’, will plan and deliver services which meet the needs of their communities - person-centred, integrated and with a focus on prevention and addressing health inequalities.³

Meeting the needs of a growing population

The borough’s population in 2019 was around 183,000. This is projected to grow to 203,000, in the next 10 years, by 2031. This will place significant additional demand on services and infrastructure.⁴

Meeting the needs of both an ageing population, and a high proportion of young people

As well as the increase in the borough’s population, the age profile of Southend is changing, with a growing number of older people, and a significant proportion of population aged 0 -19 years. The proportion of the population who are of working age is projected to decrease by 3% by 2031 while the over 65 population is projected to increase by 4%.

Addressing digital inequalities

Digital inequalities are an increasing priority locally and nationally, as the NHS, wider health and care system and other public services are committed to deliver information and services digitally

² Public Health England (2020) Local Authority Health Profile 2019 Southend-on-Sea
<https://fingertips.phe.org.uk/static-reports/health-profiles/2019/E06000033.html?area-name=Southend-on-Sea>

³ Mid and South Essex Health and Care Partnership (2020) 5 Year Plan for Improving Health and Care
<https://www.essexcommunityfoundation.org.uk/wp-content/uploads/2020/12/Mid-and-South-Essex-Health-and-Care-Partnership-5-Year-Strategy.pdf>

⁴ Annual Public Health Report for Southend 2019
<https://www.southend.gov.uk/health-wellbeing/director-public-health-annual-report>

where appropriate. However, many people who could benefit from digital services lack basic digital skills or do not use digital technology.⁵

Meeting the needs of an increasing number of people living with long-term chronic health conditions and multiple long-term conditions

Personalised, proactive, and holistic planned care and services can help people with long term conditions manage their condition, improve their independence, health and wellbeing, and quality of life, as well as slowing progression of disease and preventing emergency admissions.

Meeting the needs of adults with a learning disability

Many adults with a learning disability are dying prematurely. Supporting them to access the annual health check and other preventative services such as screening and immunisation.

Meeting the needs of an increasing number of people living with dementia and supporting their families and carers

Dementia is a long term, progressive condition associated with complex needs and, especially in the later stages, high levels of dependency and morbidity. The recorded dementia prevalence amongst people aged 65+ registered with a Southend GP was 5.08% in 2020⁶. This is higher than England (3.97%) and the East of England (3.95%). The number of people with dementia is expected to grow rapidly over the next several decades.

Addressing the local statistics on the health of our population

This includes, health protection and immunisation, health improvement challenges, health checks and harm prevention.

5: Opportunities and assets

As a unitary authority, the Council has greater autonomy in its strategic decision making, with the ability for greater innovation and targeted intervention for the borough's residents.

a) Southend 2050 - a shared vision of the future

The Council has a shared vision of the future - the Southend 2050 ambition, 5 themes, a number of outcomes and delivery roadmap (**see appendix 1**).

b) Clear COVID-19 recovery priorities

As we progress through the current COVID-19 pandemic, The Council has developed 6 political recovery priorities for Southend. These have been developed to establish the key considerations that should factor in future planning for Southend under the 2050 ambition.

The 6 recovery priorities are:

- Economic focus on a stronger and safer town
Southend rebuilds and supports a local economy and social infrastructure that recognises recent challenges but is clear about the ambition for the future.
- Green city and climate change
An ambitious place that is committed to the climate emergency, and takes steps towards making sustainable, long lasting and far reaching impacts across Southend.
- Travel and transport

⁵ NHS Digital (2019) Digital inclusion guide for health and social care

<https://digital.nhs.uk/about-nhs-digital/our-work/digital-inclusion>

⁶ Public Health England (2021) Fingertips Dementia Profile

<https://fingertips.phe.org.uk/profile-group/mental-health/profile/dementia>

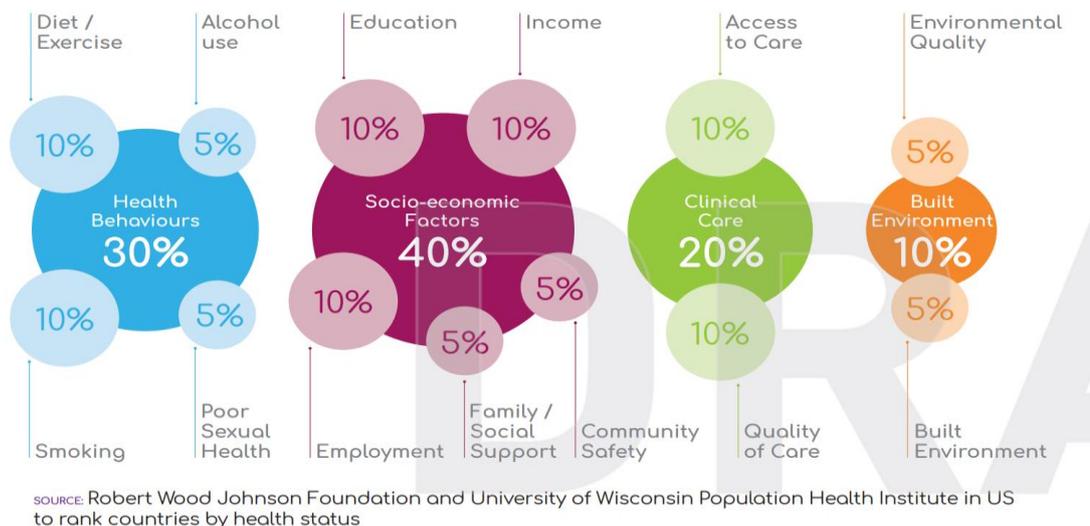
Understanding the need to move in, out and around Southend, our travel and transport infrastructure will address the present challenges and look to future options that support Southend’s green city ambitions.

- People and communities
Working with communities to find solutions in response to local issues.
- Major projects
Delivering on key pieces of work that strongly position Southend socially, environmentally, and economically for the future.
- How The Council learns and recovers as an organisation
A proactive and forward-thinking council that adapts, responds and reshapes to current challenges, that future-proofs with the delivery of quality services.

c) The Mid and South Essex Health and Care Partnership

The Mid and South Essex Health and Care Partnership is a partnership of all the NHS organisations and councils that are responsible for health and wellbeing and the three Healthwatch organisations for mid and south Essex.

The partnership has a vision to ensure that residents are well informed to make a choice and have control over their health and wellbeing. They will enable easy access to integrate health and care provision, delivered to reduce health inequalities with the broader partnership embracing the population health management approach and giving due consideration to the proportion impact of the wider determinates on health and wellbeing:



The Health and Wellbeing Strategy is aligned with the Mid and South Essex Health and Care Partnership Strategy (**see appendix 2**). This is to ensure that their priorities listed below are achieved. This strategic framework will guide the development of the Integrated Care System (ICS) and the South East Essex Alliance’s Place Plan:



Reducing health inequalities

Ensuring skilled mental health and social care support, to enable self-care and prevention through population health management. Identifying specific needs of our south east Essex population, including all neurodivergents (differing in mental or neurological function), to help tackle the health inequalities.

Transformation

The following dedicated improvement programmes will operate:

- ❖ Reducing the readmission rate for south east Essex residents.
- ❖ Providing children, young people and adults with early and appropriate mental health interventions, which take into account the specific need relevant to neurodiversity.
- ❖ Embed home first ethos.
- ❖ Ensuring good access to support for people with common mental health problems, to meet the higher demand for mental health support post COVID-19.

Primary Care and Primary Care Networks

Primary care is the provision of integrated, accessible health care services by clinicians, who are accountable for addressing a large majority of personal health care needs.

Primary care networks (PCNs) are groups of GP practices working closely together in partnership with community, mental health, social care, pharmacy, hospital and voluntary services in their local area. PCNs form the vehicle for delivering collaborative working amongst front-line staff.

PCN's will also address the wider health of their population, taking a proactive approach to assessing the needs of their local population and managing population health. PCNs and the broader integration of health and care services in the Integrated Care System offer an opportunity to move from a medical model of care to a whole system that embraces a holistic, preventative and social approach to supporting people

with all aspects of their health and wellbeing with a focus on reducing health inequalities.⁷

This, and the move to more person-centred care will see PCNs be the launch pad for whole system delivery, enabling shared decision making with anyone who has a health, care or social need, and allowing personalised care and support planning for those living with a long-term health condition. Through these principles, PCNs will enable improvements in self-care and links between individuals and other non-medical interventions through social prescribing.

The Primary Care Strategy ensures the enhanced role of primary care within mid and south Essex. The strategy will guide the strategic and operational development of Primary care, and Primary Care Networks and emphasise their importance as part of the wider health and care system.

Health service reform and health and care integration

The NHS and its partners in mid and south Essex were formally designated an Integrated Care System (ICS) in March 2021 and following planned legislative change will become fully operational in April 2022.

The government has published a Health and Care bill, detailing how it will reform the delivery of health services and promote integration between health and care.⁸ The proposed legislative change will create statutory ICSs by April 2022 and clarify roles and responsibilities between health and care organisations. ICSs have four key purposes:

- Improving outcomes in population health and healthcare.
- Tackling inequalities in outcomes, experience and access.
- Enhancing productivity and value for money.
- Supporting broader social and economic development.

The ICS will be made up of two parts with distinct statutory functions:

- Integrated Care Boards (ICBs) - responsible for commissioning, including ambulance and nursing services, and some dental services and primary care services. Clinical Commissioning Groups (CCGs) will be legally abolished, and the statutory ICBs will take on many of the current functions of CCGs. ICBs will also have legal duties, including to reduce inequalities, improve quality, maintain patient choice and promote integration.
- Integrated Care Partnerships (ICPs) - ICBs and local authorities to establish an ICP. Each ICP must then create an integrated care strategy involving people who live in the partnership's area with a focus on influencing the wider determinants of health and broader socio-economic development.

Other key ICS features are:

- Place-based partnerships between the NHS, local councils and voluntary organisations, residents, people who access services, carers and families – these partnerships will lead design and delivery of integrated services.
- Provider collaboratives, bringing NHS providers together across one or more ICSs, working with clinical networks and alliances and other partners, to secure the benefits of working at scale.

⁷ Mid and South Essex Health and Wellbeing Partnership (2021) Primary Care Strategy – to be published

⁸ House of Commons (2021) Health and Care Bill

<https://bills.parliament.uk/bills/3022>

d) NHS organisations, local authorities and the voluntary and community sector in mid and south Essex have made a commitment to developing as ‘anchor institutions’

An anchor institution⁹ is one that, alongside its main function, plays a significant and recognised role in a locality by making a strategic contribution to the local economy.

The Southend organisations that form part of the Mid and South Essex Health and Care Partnership have signed a charter recognising their role as anchor institutions and committing to further support the wellbeing of local communities.

Using the anchor charter¹⁰ and a shared approach they will work to:

- Target inequalities.
- Create the conditions to attract local investment and economic growth.
- Increase educational aspiration and attainment among children and adults.
- Offer local employment opportunities.
- Address discrimination in all its forms.
- Create a culture of diversity and inclusion - ensuring equality of opportunity for all.
- Lead the way in supporting the health and wellbeing of our workforce and our residents.
- Address concerning trends such as lowering aspirations of young people, and health disparities exacerbated by COVID-19.

e) A strong and vibrant voluntary, community and social enterprise sector

We are fortunate to have a strong and vibrant voluntary, community and social enterprise sector, supported by Southend Association of Voluntary Services (SAVS). They continue to lead with partners our drive to improve health and wellbeing and deliver health, care and support services. Independent local organisations and charities are supported, to develop system scrutiny and challenge as necessary, to ensure constant improvement with services.

SAVS are supporting us to instil more community development in our joint endeavours and continue to help mesh together the complex web of this sector. Schemes such as Community Connectors, Parent Champions and the Social Prescribing Link Workers are setting the foundation for enabling co-production and community ownership, acting as a vital bridge in our stewardship with local communities.

f) Well established existing partnerships

In addition to the Health and Wellbeing Board, there are several well-established partnerships, which enhance our ability to improve health and wellbeing and address inequalities. These include (not an exhaustive list):

- Mid and South Essex Health and Care Partnership / Integrated Care System
- South East Essex Alliance
- Primary Care Networks
- A Better Start Southend (ABSS)
- Essex Transforming Care Partnership
- Southend Safeguarding Partnership
- Southend Community Safety Partnership
- South East Local Enterprise Partnership

⁹ The Health Foundation (2019) Building healthier communities: the role of the NHS as an anchor institution
<http://tracker.health.org.uk/publications/reports/building-healthier-communities-role-of-nhs-as-anchor-institution>

¹⁰ Mid and South East Essex Partnership (2021) Charter for the Mid and South Essex Partnership of Anchor Institutions
<https://www.mse.nhs.uk/download.cfm?doc=docm93ijjm4n1385.pdf&ver=2308>

- Southend Business Partnership

g) A commitment to co-design and co-production with our residents and communities

The Southend 2050 ambition, outcomes and delivery roadmap was developed through investment in substantial engagement and co-design with stakeholders and communities. Our partners have also adopted this approach, acknowledging the importance of involving local people in the decisions about what support and services will make a positive difference to their lives.¹¹ The South East Essex Alliance / ICS's Place Plan is also setting clear parameters in how they will further embrace this commitment. A range of co-production initiatives, enabled through partnership work between ABSS, SAVS and The Council have been underway during the last 2 years. These have generated much interest from local organisations and residents.

The wide community goodwill that we have experienced in our fight with the coronavirus pandemic, should be harnessed to ensure our residents can better own their health and wellbeing and contribute positively to some of our environmental challenges (built or natural) and in better informing socio-economic developments.

h) Assets

Southend has considerable infrastructure and community assets which can contribute to improvements in health and wellbeing. These include:

- Good transport infrastructure and links including Southend Airport.
- High quality parks and green spaces.
- Sport and leisure facilities.
- Seven miles of coastline with clean beaches.
- High quality arts and heritage, including museums, art galleries, theatres and cinemas.
- Attractive planned improvements to the town centre including the Better Queensway and other new developments.
- Excellent schools, colleges and a University of Essex campus.
- High quality healthcare - 25 GP practices, an acute hospital with satellite clinics, community and mental health services.
- Range of community associations, third sector and membership organisations.
- A Better Start Southend £40m Big Lottery Funding to improve the lives of Southend's younger families.

However, we will need to continue to influence how we can improve these especially as the new Local Plan will be setting out future housing growth. We will need improved local infrastructures, encourage people to look after our environment and making better use of our recreational facilities. More is required to further enhance our children's outcomes (such as positive parenting, educational achievement and economic opportunities).

¹¹ NHS England and NHS Improvement and Coalition for Personalised Care (2020) A Co-Production Model
<https://coalitionforpersonalisedcare.org.uk/resources/a-co-production-model/>

6. Our priorities

Our priorities have been developed by,

- Identifying key health and wellbeing issues from evidence and health intelligence and key local documents including the Annual Public Health Report¹², Joint Strategic Needs Assessment¹³, and local health profiles.¹⁴¹⁵
- Consulting with a wide range of partners and stakeholders, including the community panels.
- Consulting with the local community using the Your Say Southend platform.

Seven priorities have been identified as part of this strategy. Within the priorities section below, there are a number of actions, to help us achieve our priorities.

We will collectively review our priorities throughout the life of the strategy. The priorities chosen are those which will make the biggest positive impact on people's lives and help with the recovery from the pandemic. Many of these will be delivered through a number of local partnerships and delivery groups (some of which have been highlighted in section 5e above) and we will ensure optimisation across these partnerships.

Priority One: Health inequalities

Improving health outcomes by addressing and reducing variation within the wider determinants of health (education, housing, employment and income).

Actions:

- Working with partners in the Mid and South Essex Anchor Programme to develop The Council and NHS organisations as 'anchor institutions', maximising their impact on the local economy and community. Specifically, this will include the following:
 - Widening access to good quality employment and being a good inclusive employer adopting sustainable practices and reducing environmental impact.
 - Purchasing services and goods from more local sources and embedding social value in purchasing decisions.
- Targeting key population groups
 - Older people
 - Carers
 - Residents with disability, learning disability and mental health needswho may have socio-economic disadvantage and / or social isolation by co-producing social care strategies to address their needs including employment and housing.
- Working with partners in the South East Essex Alliance to address key themes – population health and health inequalities, sustainability and locality development. The

¹² Southend-on-Sea Borough Council (2020) Southend-on-Sea Annual Public Health report 2020 – *to be published*

¹³ Southend-on-Sea Borough Council (2020) Southend-on-Sea Joint Strategic Needs Assessment(JSNA) – *to be published*

¹⁴ Public Health England (2019) Southend-on-Sea Local Authority Health Profile 2019
<https://fingertips.phe.org.uk/static-reports/health-profiles/2019/E06000033.html?area-name=Southend-on-Sea>

¹⁵ Public Health England (2021) Southend-on-Sea Child Health Profile 2021
<https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/13/ati/302/are/E06000033>

partners recent priorities have included joint work on rough sleepers, seasonal influenza, COVID-19 response, care homes and staff health and wellbeing.

Priority Two: Effective Partnering

Partnerships work in a coordinated way to ensure system alignment, shared resources and focus on co-production, to make Southend a healthier place.

Actions:

- For Southend to continue to work closely with Essex County Council, Thurrock Council and the 12 local district councils as part of the greater Essex system.
- For Southend to continue to be an active partner in the Mid and South Essex Integrated Care System, working with the NHS and its partners to:
 - Ensure a strategic whole system approach to meeting the health and care needs across mid and south Essex.
 - Coordinate services and the delivery of the vaccination programmes.
 - Facilitate population health improvement through an effective population health management programme.
- Address the wider determinants of health by assisting local groups and organisations to include consideration of health, equity and sustainability as a standard part of their decision-making processes.¹⁶ There is a strong focus on prevention in this approach, but it is also a way of ensuring quality services for those with complex needs.
- Co-ordinate use of community champions, volunteers and ambassadors to improve understanding of the needs of local groups and communities, engage with marginalised or vulnerable groups, and promote health and wellbeing information and services. They may also assist with opportunities for co-production in system and service design.
- Ensure system alignment and shared resources for targeted work to address health inequalities.
- Improve equality and equity of access to services and support through the use of information and digital resources.
- Work together to coordinate and implement the restoration, recovery and renewal responses to the COVID-19 pandemic.
- Work together, under the guidance of the Health Protection Board, to prepare resilience plans for further waves of COVID-19 or future pandemic disease.
- Collaborate and share evaluation, case studies and good practice.

¹⁶ Local Government Association (2016) Health in All Policies: a manual for local government
<https://www.local.gov.uk/sites/default/files/documents/health-all-policies-hiap--8df.pdf>

Priority Three: Accessible Services

Ensure health services are designed to be as accessible as possible for users, identifying, reducing and removing barriers to access.

Actions:

- Embed a culture of co-design and coproduction across Southend's agencies and organisations, to help promote services and make them more accessible.
- Prioritise prevention and early intervention work to prevent disease or injury. Individual staff to 'make every contact count' (MECC) and to signpost to services and sources of support.
- Reduce the impact of long-term health conditions, through different health initiatives which help people manage their conditions.
- Improving access to sexual health services and providing opportunities to reduce teenage pregnancies.
- Include social prescribing in the health and wellbeing offer (moving to include self-referral), so that residents are supported to access community organisations.
- Work together to understand the impact of COVID-19 on people and communities, to establish priorities and actions so that everyone is able to access the services available.
- Ensure people with dementia are supported and receive the appropriate services in an appropriate and easily accessible manner.
- Through partnership working, to support residents to act and look after their mental wellbeing and reduce the numbers of death by suicide.
- Work strategically with partners to ensure that targeted work is carried out around suicide and harm prevention, particularly with groups that are a higher risk.
- To ensure harm reduction services are available to those that need them, quickly and appropriately.
- Ensure people with learning disabilities, autism and all neuro-divergent challenges, are supported and receive the appropriate services; improving the uptake of learning disability health checks, implementing the recommendations of the new autism strategy and delivery of the learning disabilities mortality review programme (LeDeR) recommendations.¹⁷
- Provide easily accessible and appropriate weight management pathways and programmes for adults and children to meet the needs of different population groups. These should include advice on diet, nutrition, lifestyle and behaviour change and a more accessible universal offer to promote healthy weight.
- Ensure and prioritise legal compliance with stakeholders and identify budgetary issues which may be obstacles to the provision of legally compliant and safe statutory services.

¹⁷ NHS England (2021) Learning from lives and deaths – People with a learning disability and autistic people (LeDeR) policy 2021
<https://www.england.nhs.uk/publication/learning-from-lives-and-deaths-people-with-a-learning-disability-and-autistic-people-leder-policy-2021/>

- Continue and improve joint delivery of the Transformation Plan for the Emotional Wellbeing and Mental Health of Children and Young People in Southend.
- Continue to ensure that everyone has access to a good level of education. In doing so, help set the appropriate patterns of health and wellbeing, in which people can thrive.
- Deliver targeted health and wellbeing programmes and statutory NHS services for children and young people that have partial or no access to mainstream education, ensuring that those with special educational needs and disabilities (SEND) receive appropriate care and support to help them thrive.
- Strengthen community safety and build community resilience, with a particular focus on people with potential vulnerabilities, such as older people, children and young people and those with physical or sensory impairments; reducing the fear of crime and criminality.
- Provide and signpost parents to useful resources and support, to help with the challenges of parenting and enable better family outcomes.
- Improve the identification and management of individual health priorities, to enable people to manage their own health, and improve their quality of life.
- Identify, reach and give appropriate support to people experiencing social isolation and loneliness. Support may include help to build and improve social connection and / or improve independence, signposting to services and activities e.g. befriending or buddying schemes, educational, cultural and social activities, or community engagement activities like volunteering.¹⁸
- Ensure the mental health and wellbeing needs are met appropriately for children and adults with autism, learning disabilities and mental health (neurodivergent).
- For learn to swim opportunities to be made available for every child, as part of their education.

Priority Four: Workforce Development

Skilled workforce to support the borough's health and wellbeing needs.

Actions:

- To support and develop the care market, to help people access the appropriate services in the community, to enable them to remain independent for as long as possible.
- Provide MECC training for the health and social care and wider public sector, business and third sector workforce, to empower them to use day to day interactions to support people make positive changes for their health and wellbeing.
- Develop workforce plans to improve recruitment and retention in health and care sectors and support high quality service delivery. Understand the impact on staff of delivering services during the COVID 19 pandemic and plan support for their recovery.

¹⁸ Local Government Association (2016) Combatting Loneliness: A guide for local authorities
https://www.local.gov.uk/sites/default/files/documents/combating-loneliness-guid-24e_march_2018.pdf

- Improve workplace health by supporting local employers across the borough to be ethical and person-centred, providing training, progression and development opportunities, and prioritising staff welfare.
- Re-skilling and upskilling the local workforce to ensure it remains responsive to existing and future challenges and to changes in working practice and service delivery.
- Promote the positive health and wellbeing benefits of employment, volunteering and community involvement.
- Continue to engage with volunteers, to aid with the health and wellbeing needs.
- Support health and care providers to train their staff to deliver personalised care and brief interventions (making every contact count) to improve client outcomes and experience.
- Continue to promote sport and leisure leadership and volunteering opportunities for children and young people.

Priority Five: Spatial Planning

Use active environment design and spatial planning, so that the places and spaces in Southend encourage and facilitate activity in everyday life, making an active lifestyle as easy as possible.¹⁹²⁰

Actions:

- Use active environment design and spatial planning principles to support healthy lifestyles.
- Maintain and develop safe spaces for play, sport and social interaction, accessible for all.
- Create multi-functional space, for example, use cultural spaces for people to access the arts and heritage, in doing so increase their physical activity.
- Develop integrated active travel networks, which are, safe, connected, signposted walking and cycle routes.
- Plan for extra care and other specialist housing needs for people at all stages of their lives.
- Make better use of our existing natural and built environments to encourage healthy lifestyles for all.
- Continue to avoid or mitigate air, noise, water, soil pollution and flood risk, so our surroundings are clean and green.

¹⁹ Public Health England (2018) Spatial planning for health; An evidence resource for planning and designing healthier places
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/729727/spatial_planning_for_health.pdf

²⁰ NICE (2018) NICE guideline NG90 Physical activity and the environment
<https://www.nice.org.uk/guidance/ng90>

Priority Six: Information and Digital Resources

Ensure all residents can access clear and consistent information and services.

Actions:

- Help people improve resident's digital skills and stay safe when using online services.
- Support the delivery of the Southend Digital Inclusion Workstreams, including targeted work to address digital inequality – people who have limited or no digital access and skills.
- Ensure information, advice and resources are available in various formats and languages, including digital, to make services more accessible. Continue to provide suitable alternatives, for those that do not have access to digital services.
- Following new ways of operating, we need to ensure that face-to-face contact is utilised, as appropriate, for more effective outcomes.
- Continue the development of digital information and resources to help make health and care delivery more personal, convenient and secure.
- Maximise IT optimisation between partner agencies, which can deliver more effective digital solutions, increase the availability of digital devices and improve the connectivity between systems.
- Continue to grow and co-design the Livewell Southend website, to provide better access to health and wellbeing information and advice, support services and local activities.
- Ensure digital information on local websites and apps are accessible. This includes those with impaired vision, motor difficulties, cognitive impairments or learning disabilities, deafness or impaired hearing, and those where English is not their first language.

Priority Seven: Coordinated Communications

Work with partners to develop our communications and health campaigns strategies, to increase awareness of health risks, raise awareness of local services and support and encourage people to take action to improve their health and wellbeing.

Actions:

- Deliver a range of both local communications and campaigns to promote prevention (including immunisation programmes) and early detection of disease, encourage healthy lifestyles and improve understanding of the wider determinants of health.
- Where possible, co-design and co-deliver health and wellbeing communications and campaigns with target groups and partner agencies.
- Develop and deliver a communications plan to support the restoration, recovery and renewal of the community and services following the COVID-19 pandemic.

7. **How we will know we have made a difference**

An action plan (**see appendix 3**) has been developed to broadly cover all the priority areas, detailing the:

- Shared goals, tasks, outputs, outcomes and success measures.
- Task leads and delivery teams.
- Review periods.

There will be a performance monitoring framework, which leads will monitor and report on the implementation of the plans and their impact. This will be done via the Public Health Senior Management Team on a monthly basis and twice a year to the Southend Health and Wellbeing Board. We will be linked into various partnership boards as well to report on progress. Impact will be evaluated using both quantitative and qualitative methods, including feedback from local people, performance indicators and health and wellbeing outcome measures.

The reporting to the Southend Health and Wellbeing Board will be updates on the delivery and impact of the strategy.

8. **Appendices**

The following appendices are attached, as part of this strategy.

- Appendix 1 – Southend 2050 – [Link here](#)
- Appendix 2 – Mid and South Essex Health and Care Partnership Strategy – [Link here](#)
- Appendix 3 – Health and Wellbeing Strategic Action Plan
- Appendix 4 – Glossary of Partner Organisations