

Richmond Health and Care Plan 2022-2024

Refreshed to produce a new two year Plan highlighting system priorities

Start Well | Live Well | Age Well

Richmond

This Health and Care Plan is developed with the aim of ensuring residents Start Well as children, Live Well as adults and Age Well for longer as older adults. This plan does include some of the health and care services delivered across the borough that no single organisation can achieve alone. Our local NHS organisations, the council and voluntary and community services will continue to work together towards these goals in partnership with our communities. This is a refreshed plan which is an update from the Richmond Health and Care Plan 2019-21.

To help achieve this aim, four overarching themes that feature across the life course have been identified by the borough's Health and Wellbeing Board and Richmond's local system leaders to focus on over the next two years:

- Identifying, recognising and supporting unpaid carers of all ages, to ensure that in all of the objectives, unpaid carers are linked to appropriate support options enabling them to reduce the social, financial and mental and physical health impacts they face.
- Tackling obesity in all ages, enabling people to live physically active and healthy lifestyles, at a healthy weight, to prevent ill-health and improve wellbeing.
- 3. Promoting the mental health and resilience of residents of all ages.
- Tackling inequalities in health to reduce disparities for those most disadvantaged (especially in light of the COVID-19 pandemic).

Richmond is the second smallest	It is projected that by 2029 the	The proportion of physically active
London borough and is home to an	80+ year old age group in Richmond	people walking or cycling to work
estimated 200,705 residents	will increase by 34%	has been decreasing
Levels of child obesity are better than	There is a high rate of hospital	The emotional and mental health of
across England, but 4.7% of children in	admissions of young people for	children and young people is a key concern
Reception are obese and this more than	injuries and a high rate of hospital	in the borough. There are an estimated
doubles to 11.1% of children by the time	admissions for self-harm in children	4,600 5-19 year olds with a diagnosable
they reach Year 6	aged 10-19 years	mental health disorder
Health disparities exist within the borough, with men in the most deprived areas having an average life expectancy at birth 6.5 years shorter than those in less deprived parts, for women this is 1.5 years	In 2019/20 there were 165 (502/100,000) hip fractures in people aged 65 and over; higher than the rate for London but lower than the rate for England	It is estimated that 12,553 people in Richmond have diabetes (all types). This includes people that have already been diagnosed by their GP and those undiagnosed - around 55% of people living with diabetes are diagnosed
In 2020, there were 1,693 (4.7% of) adults aged 65+-year olds in Richmond living with dementia	Alcohol consumption is high; 1 in 3 adults in Richmond drink over 14 units of alcohol a week	60% of Carers aged 65 and over reported having at least one long-term health condition compared to 42% of Carers aged 18 to 64

For more information, please visit www.richmond.gov.uk//health_and_wellbeing_board_plans_and_strategies

Our vision

"We want people of all ages to remain as healthy as they can for as long as they can. This refreshed Health & Care Plan describes this vision, priorities, objectives and outcomes to help us meet the health and care needs of local people and deliver improvements in their health and wellbeing."



Start Well

What happens in early life affects your health and wellbeing as you get older. We want to make sure that all children in Richmond have a good start to life and the right support to thrive and fulfil their potential. Live Well The health and wellbeing of our working-age population impacts not just individuals, but also families, children, workplaces and communities. We will promote good health in adulthood, with the ambition of preventing the development of many long-term conditions and disabilities, enabling people to live in good health for longer.



Age Well

We want to encourage active, resilient communities that promote healthy ageing and reduce loneliness and isolation for our older residents. We will also support people to live at home independently and for as long as possible, including people with dementia.



What we've achieved so far

This refresh is being made 18 months into the global COVID-19 pandemic which has greatly affected the borough. Sadly, we have lost one in every 600 residents and almost 20,000 have had a confirmed COVID-19 infection to date. Despite all of our best efforts, many people have missed routine medical care and treatment and there is increased pressure on the health system to catch up on this care, while COVID-19 remains with us.

However, despite the enormous challenges and impact on everyone in the borough, the people and organisations of Richmond have risen to the challenge to protect residents' health and find new ways of doing things. Excellent partnership work has enabled us to reach some of our most vulnerable residents and meet many of the aims of the original 2019-2021 Health and Care Plan, despite the disruptions of the pandemic.

Progress was reported to our local Health and Wellbeing Board in September 2021 and can be found here:

- <u>210225 LBR HWB Report Start Well -</u> progress report - March <u>21</u>
- 210301 LBR HWB Report Live Well
 progress report March 2021
- <u>210225 LBR HWB Report Age Well -</u> progress report - March 21

We need to build on these ways of working in partnership including our increased use of digital communication, enhanced joint working between statutory and voluntary sectors and with a strong focus on addressing health inequalities.



Our Health and Care Plan

Start Well



Mental health

With a national increase of mental disorders being diagnosed in 5 to 15 year olds and an increase in the number of referrals to Child and Adolescent Mental Health Services (CAMHS), we want to maximise the mental wellbeing and resilience of our children and young people. The COVID-19 pandemic has further increased the number of referrals to CAMHS with an increasing number of children presenting with more complex needs.



Obesity

We will take action to tackle obesity in all ages, expanding parent-led programmes that promote healthy eating and active play for children in their early years, and creating more opportunities for children and young people to take part in active play, sport and adventurous activities.



Children and young people with learning difficulties are among the most vulnerable in our community and can have a wide range of support and access needs. Many will have additional health conditions, including physical disabilities and sensory impairments. We want to give children and young people with special educational needs and disabilities (SEND) opportunities to flourish and be independent.

Live Well



Having one or more long-term conditions generally reduces quality of life and increases the chances of requiring support from health or social care services. Local health and care partners will continue working together in more integrated ways to support people with long-term conditions to manage their own conditions and improve the care they receive when they come into contact with health and care services.



Mental wellbeing

We will make sure that people with serious mental illness get support for their physical health as well as their mental illness. We will continue to build on the work with our partners that proactively supports people with complex mental health needs.



Reduce health inequalities for those with disabilities

We will increase the uptake of GP annual health checks for those with learning disabilities to make sure that they receive support and care for their health needs. We will continue to provide dedicated supported employment for people with a Learning Disability and increase the number of those residents who are able to live independently in settled accommodation.

Age Well

Living independently, including people with dementia

We want to maximise people's independence and resilience to enable them to live well at home where that is their choice. We will ensure that joined up health and care teams in the community provide a range of services that help people get and stay well and improve their experiences of health and care.



Tackling loneliness and isolation

The pandemic has had a particular impact on the health of our older residents over the last 18 months. Further, many have faced a challenging time through isolation over the various 'lockdown' periods and difficulties in accessing healthcare. On a more positive note, many people have also embraced digital technology in new ways, including accessing health and wellbeing advice and social connections and we will support this further to reduce loneliness and isolation for everyone.



End of life

We will continue to strive for residents to have the best possible health throughout their life and, in the end, aim for good end of life care, enabling a dignified, controlled and peaceful end to their life. We aim to support people approaching the end of their life to have control over how their last days are lived, and for them to be able to die with dignity.



How we will know if we have made a difference

Start Well

- Childhood obesity is tackled, rates of obesity in children going into Reception (age 4 or 5) and those in Year 6 (age 10-11) do not rise and ideally, reduce.
- There will be an emotional wellbeing programme in all schools, including wellbeing support, training and information for students, parents and staff.
- The quality of the experience and outcomes for young people who transition from children's to adult mental health services will be improved.
- There will be more opportunities for children and young people to take part in active play, sport and adventurous activities, including targeted programmes for those who need support to reach and maintain a healthy weight.
- More children will be walking, scooting or cycling to school.
- The identification of neurodevelopmental needs happens earlier and assessments are completed within 12 weeks of referral.
- Improvement in the early identification of children and young people with SEND through better coordinated multi-agency working and information-sharing



Live Well

- There will be a steady decrease in the proportion of people classified as overweight.
- Increased annual monitoring in primary care for identification of non-diabetic hyperglycaemia and early diagnosis of Type 2 diabetes.
- More people with a Learning Disability will receive an annual health check.
- More people with a Learning Disability will have the opportunity to take up and sustain paid employment.
- More people with a Learning Disability will live independently in settled accommodation.
- An increase in the number of mental health workers employed within Primary Care Networks (PCN's).



- Reduction in people who feel lonely and socially isolated.
- Increase in opportunities for people to remain connected to others and improve their health and wellbeing.
- Earlier diagnosis of people aged 65+ with Type 2 diabetes.
- Increase in residents supported to live independently and well for as long as they are able.
- Increase in number of residents who return home after hospital discharge.
- More than 50% of people will have their end of life wishes followed.



What people have told us

Extensive community engagement was carried out on the original Health & Care Plan in 2019. For this refreshed plan, recent surveys and reviews carried out during the pandemic response period, together with the results of engagement with the community and local organisations, have been used to inform the Health & Care Plan 2022-24.



We are currently producing a revised full Health and Care Plan. You can find a link to the current plan on our website.