

Celebrating our Creative, Collaborative and Connected Communities

- our approach to increasing wellbeing in Northumberland



Director of Public Health Annual Report 2016

NORTHUMBERLAND
Northumberland County Council

www.northumberland.gov.uk

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Foreword

I am delighted to present my 2016 Director of Public Health Report for Northumberland.

I would like to thank my brilliant public health team for all their hard work in producing this report. I am inspired by their passion, resourcefulness and willingness to go that extra mile whenever needed.

Last year I described our asset based, community centred approach to improving health outcomes in our residents and reducing avoidable health inequalities. In my report this year you will read about the progress we have made to achieve our ambition of a Northumberland in which all our communities are flourishing and resilient with high levels of wellbeing.

The Tall Ships came to Blyth this year and it was a wonderful celebration of our people, our place and our assets! We have therefore included a Tall Ships theme in our graphics to represent some of the work we have done this year and the conditions which create good health and wellbeing.

With continuing reductions to our public health grant we need to make the best use of all the resources available to us. Northumberland has a plentiful supply of energy, expertise and experience in our residents, elected members and partnerships along with the natural resources of our stunning county.

You will see through our descriptions, pictures and a short film what our communities are able to achieve with a relatively small sum of money and an abundance of energy, creativity and optimism.

Our relationship with our communities remains a listening and collaborative one. Our communities know what helps them to feel well and gives them a purpose in life. They have generously shared their views and experiences with us so that we can act on this through our public health commissioning.

Early evaluation of our collaborative, community based public health work is showing that it is having a beneficial impact on social and emotional wellbeing and this supports the evidence that positive social connections are good for our health.

Much of our work is focussed on feeling well and so in the words of the late Maya Angelou “I’ve learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel”.

I hope that you will enjoy reading my annual report.



Penny Spring
Director of Public Health



SALUTOGENESIS
AN ASSETS APPROACH

WELLBEING
CONTROL
RESILIENCE
SOCIAL CAPITAL
COMPETENCE
EMPOWERMENT
FLOURISHING

HMS NORTHUMBERLAND

OPTIMISM

WELLBEING

RESILIENT

HOPEFUL

FLOURISHING

START
RESOURCEFUL

EMPOWERMENT

M.

What makes us well?

Our approach is focussed on what makes us well rather than what makes us ill and the factors that support health and well-being, rather than cause disease.

Salutogenesis is a term coined by Aaron Antonovsky, a professor of medical sociology which focuses on the factors that create health and wellbeing, rather than those that cause disease (pathogenesis). Both are important and salutogenesis underpins an asset based approach with an emphasis on assets that support the creation of health.

Antonovsky sought to understand why people were healthy and well despite suffering adversity whereas others with easier lives did not. He wanted to know what made people healthy and resilient and discovered that a person's 'sense of coherence' was key.

"WE ARE COMING TO UNDERSTAND HEALTH NOT AS THE ABSENCE OF DISEASE, BUT RATHER AS THE PROCESS BY WHICH INDIVIDUALS MAINTAIN THEIR SENSE OF COHERENCE, AND ABILITY TO FUNCTION IN THE FACE OF CHANGES IN THEMSELVES AND THEIR RELATIONSHIPS WITH THEIR ENVIRONMENT."

Aaron Antonovsky

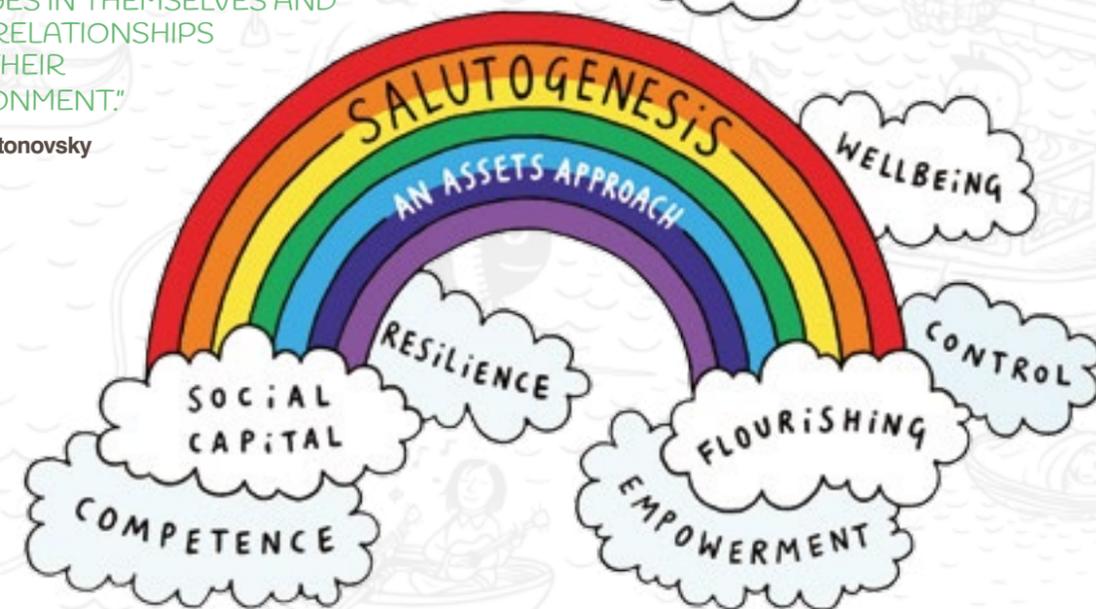
This 'sense of coherence' comes from having a life that is: comprehensible or holds some degree of certainty or predictability so that we can understand and take part in the world about us; is manageable by having enough resources to be able to control our lives and meet the demands and challenges of life; meaningful so that we have a purpose and can keep moving forward and overcoming challenges. Antonovsky also recognised the value of having emotional connections with friends, families and feeling part of our community. Establishing a strong sense of coherence from the early years will not only give children the best start in life, it will also support and promote their health and wellbeing through adolescence and adulthood to older age.

When we feel that life is manageable and secure, when we have good relationships and have the confidence and skills to manage challenges, then we feel good about ourselves and our community. Evidence suggests that when we feel this way we are more likely to keep in touch with friends and family, help and support one another, keep active, busy and well instead of relying on substances such as tobacco, alcohol, drugs, high fat or high sugar diets to cope with difficult circumstances.

Our ambition is to reduce health inequalities. This involves working across our whole population but increasing the scale and intensity of our work with communities who have less access to opportunities and resources. Many of the indicators shown in our info-graphic page at the end of my report, illustrates that Northumberland as a whole is similar or better than the England average however this masks the variation we have between our most affluent and deprived communities in our large and diverse rural county where inequalities still persist.

These wide ranging factors show that it is our educators, employers and businesses, our planners and landlords who can have a significant impact on creating the conditions in which good health and wellbeing can flourish. As I highlighted in my last report "Public Health is everybody's business", joined-up action by a whole range of partners working with our communities will help to make Northumberland a healthier place to live, work and play.

The remainder of my report will focus on how we as a partnership of organisations, services and communities have been working on the priorities in my last report and how we intend to continue moving this approach forward in the coming year.



Maximising the strengths and assets already in our communities

We promised to challenge our thinking in public health and move from a deficit model to focussing on and maximising the strengths already in our communities.

Last year, I described our proud and passionate communities as being Northumberland's greatest assets and we have had first hand experience of seeing these assets in action over the last 12 months through our work with the Community Development Trusts in North Northumberland. Our approach has been one of collaboration and community focus and has involved listening to local communities about what they feel makes them stay well and live purposeful lives. Listening to our residents and hearing what their solutions are has given us invaluable insight about the conditions that create good wellbeing and health in our communities.

We worked with three Community Trusts across North Northumberland (the Glendale Gateway Trust, Seahouses Development Trust and Berwick Community Trust) to pilot a small grant system to support community groups to improve the wellbeing of their local communities. Grants of up to £100 were managed and distributed by the Trusts and early evaluation has shown how a small amount of money, a simple application process and lots of energy and passion from communities can achieve positive impact in these rural areas.



What we have learned so far

- Our communities are already very resilient and solution focussed.
- Professionals and officers might have some expertise, but our residents are experts in where they live, what will and won't work, who the key connectors are and how to get things done.
- Communities are unique and so are their issues and strengths, so we shouldn't assume the same solution will work everywhere.
- Residents have a stake in their community and have a strong sense of pride and usually want to improve the area for the whole community.
- People do want to take on more responsibility for their area and do things for themselves.
- It doesn't take a great deal of financial resources to get people together to spark ideas.
- So much can be achieved without much money and a small amount of resources goes a long way.
- Micro grants give people enough confidence to try new solutions without fear of failure.
- We need to grow what is already there, rather than coming in with new initiatives.
- Data only tells part of the story, we need to understand the story behind the data.
- And finally, there has to be trust and that takes time.



How the micro grants have been used

There are so many amazing examples of communities coming together to use these micro grants to solve an issue in their area.



A micro grant was used to buy litter picking equipment enabling a group of residents to meet up to walk and to clear the beach. This grant allowed this group to socialise, keep the area free of litter and to continue to do so until the equipment is no longer fit for purpose. A prime example of solidarity and a sense of pride for their village.

A micro grant was used to buy photographic equipment and encourage people to get together to show their old photographs and portray the heritage of Glendale and Wooler.



A micro grant was used to pay for a ukulele tutor to teach children in schools.



I've been incredibly impressed with the community - with their passion, their energy and their commitment to making a difference... and not just asking for money... looking at how they can implement solutions.

The Seahouses Seaside Amateur Dramatics Club used a micro grant to pay for an affordable venue for rehearsals. The core group of 9 are now in contact with 25 new people. The group wrote and performed a comedy play to a packed house of over 100 Seahouses residents on a stormy night in January. The group is going from strength to strength.



The Seahouses Craft Group meets twice a month to share skills and increase confidence and are working on a joint project for the upcoming garden show.

People like to help... that's what we're trying to maximise, and capitalise on - human nature... calling it an asset based approach... people are their own assets, and can help themselves and help others.



A micro grant was used to set up a discussion group using equipment from the remote learning project. This provided the opportunity for residents to learn together.

Let the community do what they are good at, giving them that tiny bit of help occasionally - with the community having the power, not the local authority.

One school started collecting apples and fruit going to waste on the ground. The micro grant bought a juicer so that young people could taste fruit juice instead of pop. There was plenty to share and it was healthy and free.



Two micro grants were used to buy specialist games for older people and people with dementia and are used in the vicarage by the RVS.

The impact

Some of the projects have directly improved physical activity and health, but by far the biggest impact has been on improvements in social and emotional wellbeing. The lack of social connections increases the risk of ill health and premature death with some studies suggesting that loneliness is in the same category as smoking 15 cigarettes a day or being alcohol dependent and even surpasses the risk of obesity.

is exacerbated for many by the physical isolation of living in a rural area with the challenges of travel and mobility.

There are many stories emerging where the activities supported by the micro grants are increasing social connectedness and a sense of positive wellbeing.

The impact of austerity has reduced the activities and opportunities available which

For more information on this work view our short video



Refocusing our public health services – the story so far

We have been transforming our public health services to ensure that they are built around individuals and communities, their needs, aspirations, capacities and skills.

All our public services, not only the ones that my team commission, need to engender in individuals a sense of being an active agent in their own lives rather a feeling of disempowerment and dependency.

Integrated Substance Misuse Service

In the last year we have recommissioned our integrated substance misuse service. Asset based approaches are not new to the substance misuse field where evidence shows that recovery is more likely when built on the development of personal, social, and community capital using the assets within individual's, families and the wider community. This is achieved through personal development, building self-esteem and confidence. Throughout the next contract period we will see the service continuing to; see users as active participants in their recovery rather than passive recipients of services; recovery being built upon the strengths, skills and capabilities of users with support and challenge from a network of people in recovery. The service will be widening their reach by using existing community assets throughout Northumberland.



Integrated Wellbeing Service

We have brought together a number of health improvement services into an integrated wellbeing service. Whilst some of these services such as 'health trainers' are already working with residents on a number of lifestyle issues, in the future the service will have a greater focus on wellbeing. This process has been the next step in the move towards services that see our residents as active agents in their own wellbeing.

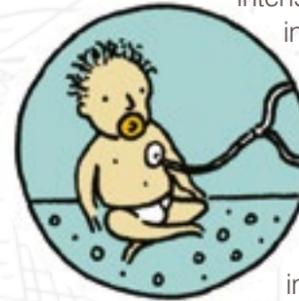
Services for the 0-19 age group

The recent transfer of the commissioning of the health visiting and school nursing services to the local authority has presented an opportunity to review all of our services for the 0-19 age group. We are in the process of developing a model of multi-agency collaborative public health service with greater integration of NHS and Local Authority services, based around the Healthy Child Programme. Key themes within this work-stream are promoting

healthy and active children and families, promoting healthy relationships and resilience through working partnerships with Sure Start Children's Centres, Early Years providers, schools and community peer support groups.

babyClear

A key area where we have been refocusing our services is increasing the scale and intensity of our work to reduce health inequalities. Whilst there has been significant progress in reducing smoking in Northumberland, there are still some groups of our population where rates have remained persistently high. These have included our residents living in more deprived areas and amongst some pregnant women. The 'babyClear' approach involves the Northumberland Stop Smoking Service and Northumbria Healthcare Maternity Department working collaboratively to deliver structured and tailored messages and the monitoring of carbon monoxide as part of routine care for mother and baby. All pregnant women with a positive carbon monoxide reading are referred to the stop smoking service for advice and treatment. The recent evaluation showed that women who did not smoke in pregnancy, went on to have babies that were more than half-a-pound heavier (260 grams or 0.57lb) at full term, than those who continued to smoke. Northumberland's rate of smoking at time of delivery has reduced by 6.9% since the implementation of babyClear, from 19.5% in 2011/12 to 12.6% at time of writing this report, which is a fantastic achievement.



Breastfeeding Peer Supporters

Our volunteer breastfeeding peer support workers do incredibly valuable work and are important assets in our communities. Peer supporters have breastfed their own babies and now provide support and advice to new mums. There is more intense peer support in those areas with the highest deprivation and lowest breastfeeding rates. This programme has had a positive impact, particularly amongst vulnerable young mothers with a 20% increase in breastfeeding overall which will have a positive impact on reducing health inequalities.

"I LIKE BEING THERE FOR THE OTHER MUMS, GIVING ADVICE, BEING HONEST AND NOT SUGAR COATING IT... I HAVE HAD SOME WHO WERE GOING TO GIVE UP, SO I SAID JUST TRY THIS AND THEY HAVE CARRIED ON UNTIL THEIR BABIES ARE 6 MONTHS, 12 MONTHS"

**Kaley Breastfeeding Peer Support Volunteer
Barnardos Seaton Delaval Children's Centre.**

Over the next 12 months and beyond we will continue to reshape our Public Health services toward an asset based community approach.



Harnessing the skills and passion in our own workforce

Across Northumberland we have a committed, passionate and skilled workforce directly or indirectly improving the health of our population.

Organisations currently involved in the funding and provision of health services in Northumberland are working together to form an Accountable Care Organisation (ACO). The ACO will formally take over responsibility for many of the health services in the county and will focus on meeting a range of key outcomes, including public health outcomes such as reducing smoking and social isolation. This will provide future opportunities to embed the principles of asset based working and a focus on wellbeing; Public Health is a key partner and we look forward to being involved in this process.

The opportunities presented are:

- To increase the confidence of local people to better manage their own health and wellbeing and know when it is appropriate to access help.
- To ensure people feel informed and have access to the information and resources they need so they can take responsibility for maintaining and improving their own health and wellbeing.
- To support health and care professionals to focus on health promotion and make every contact with the public a health improving opportunity.
- To help us all be aware of how to look after our own wellbeing and build social networks - by connecting more with others, taking time out, keeping active, learning new skills or giving your time to help others.



Our public health team has worked in partnership with Public Health England to advise and enable the development of smoke-free mental health trusts in the region. Northumberland Tyne and Wear Mental Health Trust has implemented a smoke free policy and nicotine management approach across the Trust, with staff trained by our Stop Smoking Service and a referral pathway established.

Another example of our partners embedding public health approaches throughout their organisation.



Connect

...with the people around you. Building these connections will support and enrich you every day.



A focus on wellbeing

It is estimated that up to 40% of our wellbeing can be enhanced by getting involved in activities which are: meaningful and engaging; and build confidence and self esteem.

A set of five simple, evidence-based actions (connect, be active, take notice, give, keep learning) have been developed by the New Economics Foundation to help people identify such activities.

These 'Five Ways to Wellbeing' are key to Northumberland's focus on wellbeing.



Be Active

Being active makes you feel good. Discover an activity you enjoy and one that suits your level of mobility and fitness.



Take Notice

Be aware of the world around you and what you are feeling. Reflecting on your experiences will help you appreciate what matters to you.



Keep Learning

Set a challenge you will enjoy achieving. Learning new things will make you more confident as well as being fun.



Give

Seeing yourself, and your happiness, linked to the wider community can be incredibly rewarding and creates connections with the people around you.

Working collaboratively with our partners

Whilst this approach is still new to us, across Northumberland many organisations already work in this way and are committed to taking forward asset based approaches to wellbeing.

Children's Centres

Our Children's Centres are grounded in asset based working. Staff are skilled at identifying and building on the strengths and potential in the parents they work with. This has led to improved wellbeing through volunteering, further training, education and employment.

"IT'S KNOWING YOU ARE NOT ALONE, I'VE MADE THE BEST FRIENDS HERE I'LL EVER HAVE, I'VE COME OUT OF MY SHELL, I KNOW I AM A GOOD PERSON, BETTER THAN WHAT I THINK"

Toni Dee, Barnardos Children's Centre Blyth West Children's Centre.

For more information about the work of our Children's Centres see the short film here



Bait - Creative People and Places in South East Northumberland

Bait aims to create a long-term change in the level of arts participation of people living in South East Northumberland and to increase wellbeing and social energy. Social energy is generated when residents come together to make a positive change in their community. Bait have been working in Hirst in Ashington, which is important to the heritage of the coal mining industry. At its centre is Hirst Park, which in Victorian times, represented the 'clean lungs' of the community; a place where people could go to rest and relax, the park already has a strong connection to wellbeing. The Hirst Project draws on this historical significance and has involved artists, photographers and sculptors, to work with the community to engage them in the arts. As a result of the success of the project, the community groups have been inspired to continue to hold an annual community arts event in the park, indicating a sustained interest and engagement in the arts.

"THE LEGACY OF IT [HIRST PROJECT] WILL BE THIS DEVELOPMENT, THIS TAKING WHAT'S ALREADY THERE, AND SUPPORTING THOSE GROUPS TO WORK TOGETHER TO CREATE A NEW FOCUS OF TRADITION, AND A NEW TRADITION FOR HIRST... THAT CREATES A COMMUNITY SPIRIT FOR HIRST."

Curator



The Bridge Project - Building on strengths and skills as a route into work

Good quality work is vital for good health. The Bridge Project funded by BIG Lottery Fund and the European Social Fund (ESF) is a partnership between the Council and six local voluntary organisations. The project is different to traditional employability programs in that it uses an asset based approach to support people furthest from the jobs market, who experience multiple disadvantages, and are often socially excluded. Many of the target group for the Bridge Project have low self-esteem, confidence and aspirations, but will be supported in identifying their passions, strengths and skills and will use volunteering as a route to gaining experience leading to employment and other opportunities.

Read more about the Bridge Project here



Getabout Northumberland

The Getabout access scheme coordinated by Adapt and Community Action Northumberland is another great example of a service which facilitates the community to support each other to find more effective and sustainable solutions to transport needs.

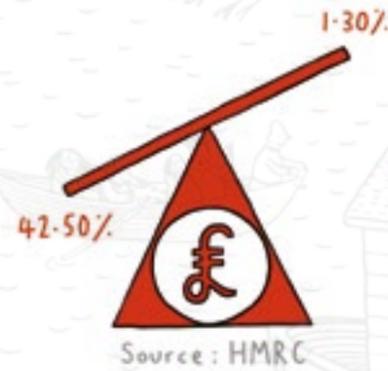
Read more about the Get About Northumberland here



The shortcomings of taking a 'deficits' or 'treatment' approach to the delivery of public services, and the ongoing reduction in resources mean we need to find better ways of working. I am keen that we in Northumberland continue to look for every opportunity to work collaboratively with our partners and communities, listening to and learning from each other to maximise and unlock the potential in our communities. This will help to not only reduce demand and dependency on public services in the long term but ensure that the ever reducing resources that we have are used to develop more effective and efficient services now.

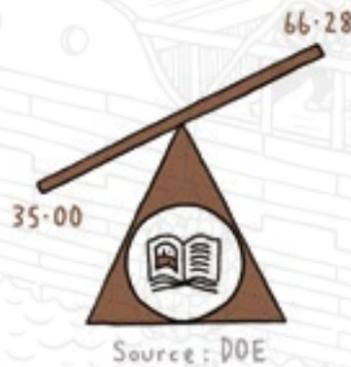
Wider Social Determinants of Health in Northumberland

Our residents reminded us that it is conditions within which they are born, grow up and live which have the greatest impact on health and wellbeing. Generally conditions are supportive of health and wellbeing in Northumberland, but there is still considerable variation within the county.

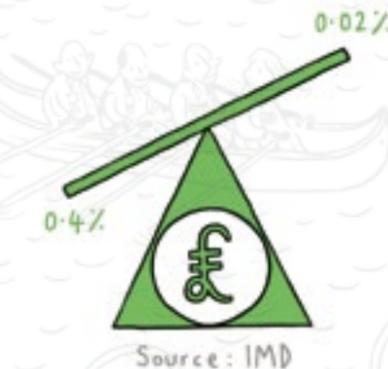


PERCENTAGE of CHILDREN IN LOW INCOME FAMILIES
 CRAMLINGTON NORTH 1.30%
 HIRST - ASHINGTON 42.50%

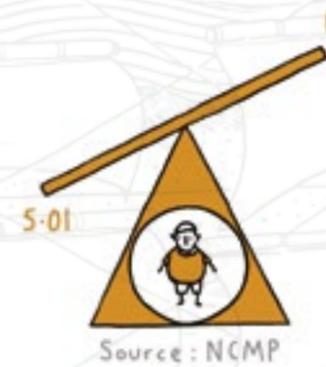
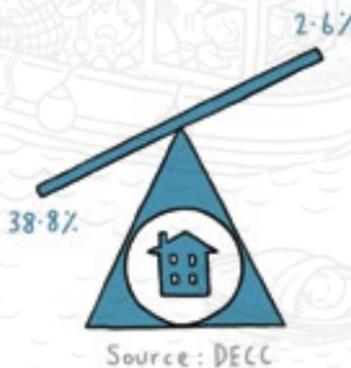
AVERAGE of KS4 ATT8 (ATTAINMENT 8 SCORE)
 PONTELAND SOUTH WITH HEDDON 66.28
 HIRST - ASHINGTON 35.00



INCOME DEPRIVATION AFFECTING OLDER PEOPLE %
 PONTELAND SOUTH WITH HEDDON 0.02%
 CROFT - BLYTH 0.4%

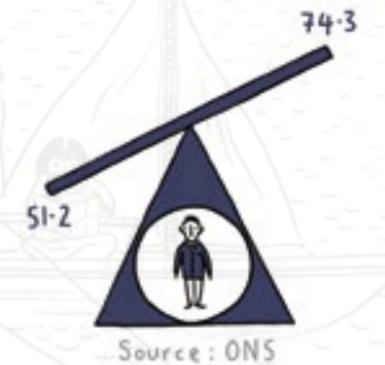


THE PROPORTION of HOUSEHOLDS THAT WERE FUEL POOR IN 2014
 CRAMLINGTON NORTH 2.6%
 WOOLER 38.8%

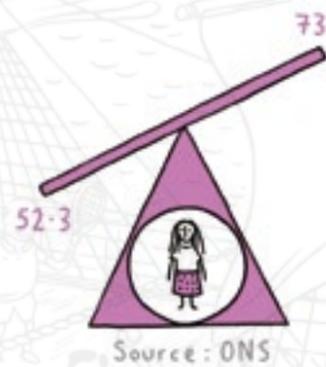


RATE PER 1,000 CHILDREN MEASURED EITHER OVERWEIGHT OR VERY OVERWEIGHT
 NORHAM & ISLANDSHIRES 0
 PRUDHOE SOUTH 5.01

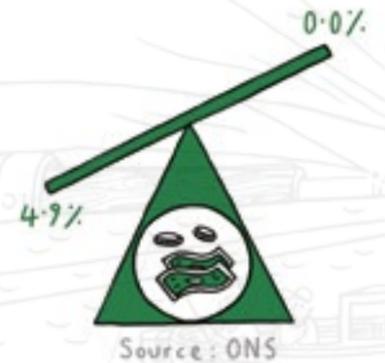
HEALTHY LIFE EXPECTANCY MALE
 CRAMLINGTON NORTH 74.3 YEARS
 KITTY BREWSTER - BLYTH 51.2 YEARS



HEALTHY LIFE EXPECTANCY FEMALE
 PONTELAND WEST 73.9 YEARS
 KITTY BREWSTER - BLYTH 52.3 YEARS



PERCENTAGE of PEOPLE AGED 16-64 CLAIMING JOBSSEEKER'S ALLOWANCE FOR MORE THAN 12 MONTHS
 ALNWICK 0.0%
 COLLEGE - ASHINGTON 4.9%



Sources: HMRC · DOE · IMD · DECC · NCMP · ONS

The areas indicated above are either the actual Wards or the Wards in which a Lower Super Output Area (LSOA) fits.

Further information relating to the health of Northumberland go to Public Health England Health Profiles here

Northumberland's Wider Determinants of Health Profile is available here

Northumberland's Child Health Profile is available here

Refocusing our Public Health Approach – What we need to do next

Developing an understanding of the scale and scope of asset based working across Northumberland has enabled us to better develop a more strategic approach.

We have spent time this year consulting with organisations who work within and across Northumberland to identify examples of asset based working and to explore what those working within communities consider the key assets in Northumberland which help create the conditions for wellbeing.

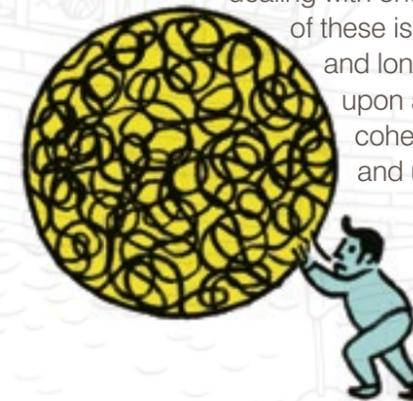
We found that:

- The people of Northumberland are proud, resilient and motivated. There is a passion to make a difference and to 'do something'. People are resourceful and motivated.
- Local knowledge is key - people and communities are those best placed to know the strengths and challenges faced within localities and how best to mobilise community assets to address these issues.
- Community spirit is considered to be good. Communities are strong and resourceful - throughout Northumberland there is a 'get on and do it' attitude. People are dedicated.
- There is a strong volunteering footprint across Northumberland, people are willing to give, there is a value placed upon being involved and in supporting others.
- The community, voluntary and business community are strong and organisations are keen to work together and with statutory organisations. There is a real willingness to collaborate. Organisational outcomes can often be similar and there is a recognition that there can be strength in partnership working which can make achieving outcomes more likely.
- The landscape of Northumberland is an asset - the access to open spaces, countryside and coastline can support positive wellbeing.



Within the consultation there was widespread recognition that people and communities were complex. Many of the underlying individual and community concerns related to the wider social determinants of health and in many cases these issues were interrelated. Common themes included long term unemployment, in and out of work poverty, debt, benefits support, issues relating to mental health and mental wellbeing, social isolation, family breakdown, access and transport issues. The debilitating implications that dealing with one, or most likely several, of these issues in both the short and longer term can have upon a person's sense of coherence, their resilience and ultimately their wellbeing.

Addressing these 'wicked problems' requires complex solutions that are rooted in asset based community development approaches, building personal and social capital, resilience and self esteem. This approach can help communities to develop a greater confidence and a stronger voice to address these structural causes of injustice and inequalities and it reminds us that asset based approaches are a complement not a replacement for action on structural injustices.



Our Priorities for 2016-2017



Due to the unique rural and diverse nature of Northumberland, it is important that any future approach to wellbeing within Northumberland should be developed around a bespoke approach rooted within local culture and values.

Moving from a deficit model to an asset based model involves new ways of thinking and working both within communities and strategically. It will see organisations working differently with each other and with the communities they seek to serve. Current approaches to developing commissioned services will need to change with a greater focus placed upon partnerships, local priorities and how best to facilitate co-produced approaches that address the wider determinants of health. Culturally there is much work to be done to facilitate systems and organisational working that embraces

co-produced commissioning and the devolvement or partial devolvement of budgets and power to communities in relation to how the wellbeing agenda is addressed into the future.

Although, as yet we are not in a position to state specifically what this new approach will look like or how it will feel, our vision for future asset based approaches to wellbeing in Northumberland is underpinned by a set of principles that aim to:

- strengthen individuals,
- strengthen communities,
- strengthen partnerships and
- facilitate access to the resources that are needed to do this.

This approach is unlikely to follow traditional models of commissioning, it seeks to join up not fragment public health and to deliver health and wellbeing outcomes that are representative of what communities and those working in communities across Northumberland have told us. We have listened and now we are acting.

You can read more about asset based approaches to improving health here

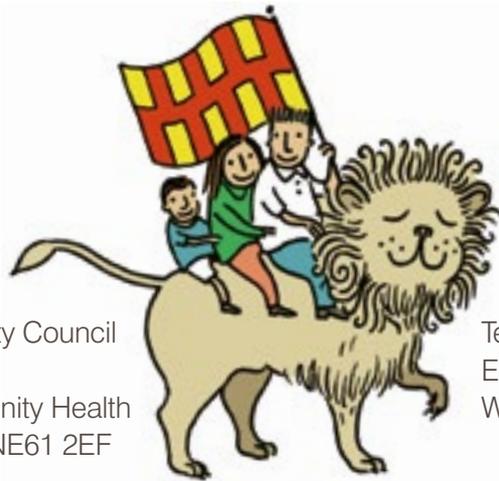


- We will continue prototyping community led asset based approaches in the North of the County and extend to other parts of Northumberland
- We will continue to reshape our Public Health services towards an asset based community led approach
- We will work with the wider Council and our Partners to share and develop an understanding and practice of community led asset based approaches



If you need this information
in Large Print, Braille, Audio
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