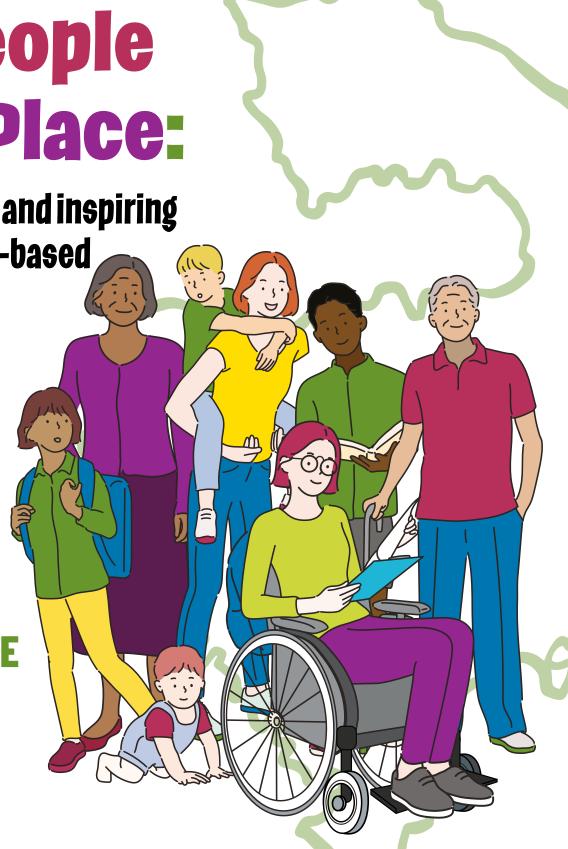


**Celebrating and inspiring** community-based wellbeing

To accompany the report available in video format



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If you would like help accessing this information, please contact us on 01926 410410.

# **Foreword**

I am delighted to present the 2024 Director of Public Health (DPH) Annual Report, which focuses on the power of people and place in promoting community wellbeing.

This report is a celebration of our residents and the places in Warwickshire, showcasing some examples of how communities have come together and how our natural and built environment have been utilised to promote and support good health and wellbeing.

The report is shaped by our residents' views on where they live; residents emphasised the importance of open and green spaces, proximity to local amenities and their communities and neighbours. The five case studies featured in the report shine a spotlight on some of the valuable activity occurring across the county on these themes, recognising there are many more! It is clear from this report that the wider determinants of health, termed "building blocks of health", ensure the good health and wellbeing of our residents.

For the first time, Dr Shade Agboola has produced the report as a mixed media video with the aim of making the content accessible and allow the audience to visualise some of the valuable assets we have in Warwickshire. I am grateful to all partners in lending their expertise in creating this product and I especially would like to express my thanks to Shade and her Public Health team.



Warwickshire County
Councillor Margeret Bell
Portfolio Holder for Adult
Social Care and Health
Chair of the
Warwickshire Health
and Wellbeing Board

# Introduction

Health and wellbeing are more than just avoiding illness or having access to healthcare. They include the ability to enjoy activities and generally have the resources needed to feel satisfied in life.

Our surroundings, from where we are born to where we grow, live and age, greatly affect our health and wellbeing. Estimates suggest that only 20% of our health outcomes are due to clinical care. Therefore, to make a positive difference, we need to focus on factors such as our communities, environment, transport, work, and housing as key building blocks of health.

This year's report celebrates the positive efforts in Warwickshire to address these areas. We recognise that these are challenging times for many, but despite the difficulties, there is much to be proud of. We have shared what residents value about their local areas and some examples of good work.

We hope this report inspires, encourages reflection, and sparks conversation on how we can work together to improve health and wellbeing through these building blocks.



**Dr Shade Agboola**Warwickshire Director of Public Health



To watch the video and for more information click <u>HERE</u> or scan the OR code



# Recommendations

#### The Power of Built and Natural Assets

We value the many and varied assets that we have across Warwickshire and make the best use of the spaces and places that are available to ensure that everyone has access and choice.

**R1:** I recommend promoting the health and wellbeing benefits of the natural environment to improve community access and use of rural and urban green spaces across Warwickshire.

R2: I recommend that community-based services and amenities actively tackle social isolation, improve social connectivity and enable individuals and groups to take an active part in society.



#### **The Power of Communities**

It is more important than ever that we work alongside people and communities and recognise their strength, power and commitment to make positive changes where they live. We recognise and celebrate the contributions that people and communities make to improving health and wellbeing.

R3: I recommend supporting local communities wherever possible in designing and delivering community-powered solutions to prevent ill health and improve wellbeing.



#### The Power of Relationships

We value the voice and contribution of all communities and partners and recognise that thriving communities and services are built on relationships and trust. We listen to the voices of people living and working in Warwickshire and actively look for ways to engage with everyone. These shared values enable us all to make positive changes that improve health and wellbeing.

R4: I recommend that all partners within the Integrated Care System recognise the Voluntary, Community, Faith and Social Enterprise (VCFSE) sector as both a service provider and a voice of local communities, and support the VCFSE Collaborative's active participation in designing, developing, and delivering local health and wellbeing services.



#### The Power of Working Together

Great wellbeing comes from looking at all aspects of life. We create and embrace opportunities for partnership working that promotes a holistic view of health and wellbeing to ensure that this is embedded in everything we do.

**R5:** I recommend that all partners on the three place-based Health and Wellbeing Partnerships accelerate the Health in All Policies approach across their activities and services.

R6: I recommend proactively designing public health improvements into Warwickshire's planning, growth and development using Section 106 agreements or other developer obligations where appropriate, targeting areas and population groups with the greatest inequalities to improve health equity for future generations.



#### **The Power of Prevention**

Health and wellbeing is much more than the absence of illness. We recognise the impact that the social, environmental and economic environment has on creating the conditions for healthy lives. We prioritise preventative action to keep people and communities healthy and help reduce the demand on our local health services.

**R7:** I recommend that the health and care system in Warwickshire embeds prevention within the local healthcare offer, focusing on preventing illness alongside delivering treatment in line with national findings.

**R8:** I recommend using collective investment for community-based interventions to be prioritised for those which have shown the highest return on investment.



#### The Power of the Possible

We believe that a healthy community for all is achievable. We support individuals and organisations to recognise their potential and take opportunities to tackle inequalities and make a positive difference.

**R9:** I recommend promoting and celebrating activities that contribute to positive community-based health and wellbeing across Warwickshire.

R10: I recommend that
Warwickshire aims to be a
national leader in community-led
wellbeing by creating conditions
for innovation and communitydriven change.



### The Power of People and Place: celebrating and inspiring community-based wellbeing

We know that health and wellbeing is influenced by where we are born, grow, age, work and live. We also know that people with good wellbeing have better health outcomes.

Healthcare only accounts for **20%** of our overall health and wellbeing. The remaining **80%** is the result of the building blocks of health such as employment, housing, communities and our health behaviours.

In Warwickshire, **4 in 5 people** report good or very good health. This year's annual report celebrates the many community assets in Warwickshire that contribute to community-based wellbeing and support our physical and mental health.

We hope this report inspires you to enjoy the fantastic resources available in Warwickshire which can help us all lead a healthier life.

# Building blocks of health

Housing

**Surroundings** 

Family, friends and communities

Food

**Transport** 

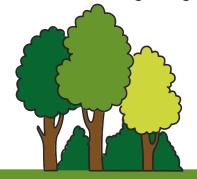
**Education and skills Work** 

## What builds a Community? The Voice of Warwickshire!

In May 2024, Warwickshire
County Council surveyed 444
members of the Voice of
Warwickshire Panel to
understand what they value
most about their communities.
This feedback provided insights
into what supports community
wellbeing.

# Community spirit Quiet Wildlife Walking Local amenities Cafes Trains Countryside Parks Schools Restaurants House prices Independent businesses Footpaths Mixed Culture Rural Peaceful Walks Motorways Green Spaces

# When asked what they like most about where they live, the Panel highlighted the following top three themes:



46% proximity to open and green spaces

# proximity to

29%

#### local amenities

#### Green Spaces:

Warwickshire's green spaces, including parks, woodlands, canals, and allotments, provide opportunities for physical activity, socialisation, and relaxation.

They support mental and physical health, helping reduce stress, enhance recovery from illness, and improve overall quality of life.

"I like that there are green spaces near to the house."

#### Libraries:

Libraries in Warwickshire contribute to community wellbeing across all ages, providing activities to benefit those at any stage of life.

Moreover, electric mobile libraries ensure access to resources in remote areas, further strengthening community bonds.

"All amenities are local with easy access."



#### **Community and Neighbours:**

Belonging to a community positively impacts health and wellbeing because it means people feel listened to, confident, empowered and valued.

Communities allow people to come together in the face of common challenges, such as the cost of living or international conflicts.

Strong communities require support and investment.

"Sense of community spirit, nice friendly neighbours."

#### **Grassroots Activity:**

Grassroots activities are led, driven and often resourced by local residents. They encourage social connections, sharing of skills, and a sense of purpose.

In Warwickshire there are a lot of activities happening that help reduce isolation, provide support and improve mental and physical health.

#### **Building Blocks of Health:**

The broader social and economic factors that influence health and wellbeing include housing, transport, employment, and education.

Warwickshire has a number of programmes that address issues like fuel poverty, connectivity, skills development and learning.

These all play a crucial role in shaping long-term community wellbeing, beyond healthcare alone.

#### Let's celebrate The Power of...

#### ...Place

making the most of our built and natural assets.

#### ...Communities

making a difference to people's lives.

#### ...Relationships

connecting people and building trust.

#### ...Partnership

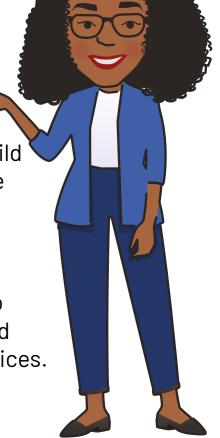
Working together to build partnerships to achieve common goals.

#### ...Prevention

keeping people and communities healthy to help reduce the demand on our local health services.

#### ...the Possible

tackling the toughest challenges to drive change.



# **Warwickshire Health Profile 2024**

Shows the current health performance of the Warwickshire county and allows comparisons of performance between the districts and boroughs. The values are coloured to indicate statistical significance compared to England. This is the most recent compiled and published data as of 30/11/2024.

Better than England Similar to England Worse than England

Key:

The comparisons to England displayed by the colour coding in the key are determined by the upper and lower limit confidence limits of the data to signify if there is a significant statistical difference.

Indicator	Unit	England	Warwickshire	North Warwickshire	Nuneaton & Bedworth	Rugby	Stratford- on-Avon	Warwick	Period
Life Expectancy at birth (Male, 3 year range)	Age	78.9	79.4	78.1	77.5	79.4	81.0	80.1	2020 - 22
Life Expectancy at birth (Female, 3 year range)	Age	82.8	83.1	82.2	81.5	83.0	84.7	83.5	2020 - 22
Life Expectancy at 65 (Male, 3 year range)	Age	18.4	18.6	17.4	17.4	18.7	19.6	19.1	2020 - 22
Life Expectancy at 65 (Female, 3 year range)	Age	20.9	21.2	20.3	20.0	21.2	22.1	21.6	2020 - 22
Percentage reporting at least two long-term conditions, at least one of which is Musculoskeletal related	%	13.4	13.6	16.7	16.3	10.0	14.9	11.5	2023
Estimated prevalence of common mental disorders: % of population aged 16 & over	%	16.9	14.8	15.8	17.6	14.4	12.8	13.8	2017
Estimated prevalence of common mental disorders: % of population aged 65 & over	%	10.2	9.2	10.1	11.0	8.8	8.4	8.4	2017
Self reported wellbeing: people with a high anxiety score	%	23.3	21.2	21.1	15.8	20.8	18.0	28.4	2022/23
Self reported wellbeing: people with a low satisfaction score	%	5.6	5.2	*	13.2	2.8	*	3.5	2022/23
Deprivation score (Index of Multiple Deprivation 2019)	Score (Higher = more deprived)	21.7	15.6	17.9	23.5	14.1	11.7	12.0	2019
Children in relative low income families (under 16s)	%	19.8	14.9	18.2	21.1	13.6	11.8	10.9	2022/23
Fuel poverty (low income, low energy efficiency methodology)	%	13.1	16.2	18.1	17.4	15.5	16.5	14.7	2022
Percentage of people in employment	%	75.7	79.2	71.0	81.0	81.2	81.7	77.8	2023/24
Unemployment (Percentage of the working age population claiming out of work benefit)	%	5.0	3.6	3.6	5.1	3.6	2.9	3.0	2021/22
Sickness absence: the percentage of working days lost due to sickness absence	%	<u>:</u> :	1.1	2.0	0.7	0.8	0.7	1.4	2020 - 22
Average Attainment 8 score	Score	46.2	47.9	43.2	42.9	48.2	51.5	52.2	2022/23
Percentage of physically active adults	%	67.1	67.4	65.8	55.9	64.9	74.8	73.0	2022/23
Percentage of physically inactive adults	%	22.6	21.4	20.0	30.3	25.9	17.2	14.7	2022/23
Air pollution: fine particulate matter (new method - concentrations of total PM2.5)	Mean - µg/m3	7.8	7.4	7.7	7.7	7.5	7.0	7.3	2022
Homelessness: households in temporary accommodation	per 1,000	4.2	0.9	*	2.0	*	0.9	1.0	2022/23
Homelessness: households owed a duty under the Homelessness Reduction Act	per 1,000	12.4	8.0	6.1	14.4	**	8.9	8.3	2022/23
Under 75 mortality rate from causes considered preventable	per 100,000	171.4	151.9	160.3	196.1	154.4	121.7	138.4	2020 - 22
Food Insecurity (INDIRECT measure) – percentage of local authority population living in areas at highest risk of food insecurity	%	*	10.9	14.8	31.5	8.0	1.0	1.8	2021
The percentage of the population with a physical or mental long term health condition in employment (aged 16 to 64)	%	65.3	75.3	80.0	65.8	82.1	85.1	71.7	2022/23
Gap in the employment rate between those with a physical or mental long term health condition (aged 16 to 64) and the overall employment rate	%	10.4	6.5	3.6	12.1	4.3	* * * *	7.4	2022/23
* Value surpressed for disclosure control ** No data *** Value missing in source data **** Value not published for data quality reasons	*** Value missir	ng in source o	lata **** Value not p	oublished for data o	quality reasons				

<sup>\*</sup> Value surpressed for disclosure control \*\* No data \*\*\* Value missing in source data \*\*\*\* Value not published for data quality reasor Source: Office for Health Improvement & Disparities. Public Health Profiles. https://fingertips.phe.org.uk © Crown copyright 2024.

# Progress on the recommendations from the 2023 Director of Public Health Annual Report:

#### **Breaking the silence: Working together to Prevent Domestic Abuse**

#### Recommendation

#### **Partnership working**

R1. I recommend that system partners work together to collectively use the Warwickshire Violence Against Women and Girls (VAWG) strategy to create a safe and encouraging environment for victim-survivors to report abuse by producing a plan of aligned and jointly prioritised actions collaboratively with the police, health partners and relevant stakeholders.

#### **Progress**

- The Violence Against Women and Girls (VAWG)
   Partnership Board continues to have a strong partnership governance structure and set of priorities.
- The Safe Accommodation and VAWG Strategic Delivery Group, which is a sub-group of the VAWG Partnership Board, oversees the VAWG Strategy Delivery Plan, a jointly developed plan with clear actions and priority areas. Work to date has included setting up a victim-survivor engagement forum.
- The VAWG Communications sub-group, which is made up of a range of stakeholders, oversees the delivery of a VAWG communications plan, aimed at improving access to services and police reporting.
- The Safe Accommodation and VAWG Strategic Delivery Group has also worked collaboratively to improve the local response to the Domestic Abuse Act 2021. During 2024, the group has worked in partnership to develop the Safer Warwickshire Domestic Abuse Safe Accommodation Strategy 2025-2028, and accompanying Delivery Plan. This partnership strategy has been informed by a range of multi-agency engagement activities including consultation with victim-survivors of domestic abuse in Warwickshire and sets out five key objectives:
- 1. Early intervention and prevention,
- 2. Accessible services,
- 3. Appropriate safe accommodation,
- 4. Multi-agency delivery and
- 5. Support to return home or move on.

#### **Recommendation**

#### Supporting child victims of violence and abuse

**R2.** Aligned with the Warwickshire VAWG strategy, I recommend dedicated resource and support is allocated to child victims to mitigate effects of violence and abuse across their life course and attempt to break cycles of abuse.

#### **Progress**

- Warwickshire County Council (WCC) has commissioned Refuge to deliver a dedicated children and young person's service to support child victims of domestic abuse. The service can support children and young people aged 4-17 and includes Children's Independent Domestic Abuse Advisors and Children's Refuge Support Workers.
- WCC also commissions Listening Ear to provide specialist domestic abuse counselling and therapy to adult and child victims of domestic abuse.
- The Office of the Police and Crime Commissioner (OPCC) Warwickshire have used Ministry of Justice funding to fund a Children's Independent Domestic Abuse Advisor employed by Victim Support.
- The OPCC Warwickshire also commissions a Sexual Violence and Abuse Support Service, delivered by Safeline, which provides outreach and counselling to support child victims of sexual violence and abuse.
- The OPCC Warwickshire also co-commissions with NHS-England to provide a Children and Young People's Sexual Assault and Referral Centre and related crisis work.

#### Recommendation

#### Linking VAWG work with Coventry and Warwickshire (C&W) Suicide Prevention Strategy

R3. To support the delivery of the Coventry and Warwickshire Suicide Prevention Strategy, I recommend that workers in frontline services are equipped with the appropriate skills and tools to support people in crisis. This should include access to training to increase suicide awareness, to develop confidence to talk about mental health and suicidality and to improve knowledge of referral pathways.

#### **Progress**

The C&W Suicide Prevention Partnership identified suicide prevention training as a key priority to support delivery of the C&W Suicide Prevention Strategy 2023-2030. A suicide prevention training programme (funded by WCC and the Integrated Care Board) is being delivered across Coventry and Warwickshire which is contributing to the five key local priorities in the strategy:

- Target our approach for those groups and communities at a higher risk of suicide.
- Increase awareness to help change public attitudes about suicide.
- Promote suicide prevention as a priority within the wider health and wellbeing activity of system partners (public, private, Voluntary, Community, Faith and Social Enterprise sectors).
- Share learning and data to ensure that prevention activity is targeted in response to locally identified priorities.
- Facilitate coproduction, collaboration and coordination to maximise the impact of suicide prevention activity across Coventry and Warwickshire.

#### Recommendation

#### **Education**

**R4.** I recommend WCC Education Services promote the opportunity for schools to participate in any training that has been commissioned by Warwickshire County Council relating to VAWG, or domestic abuse.

- **Progress**
- The Warwickshire Heads Forum and Designated Safeguarding Leads (DSL) Network meetings have focused topics, which have included International Women's' Day, Domestic Abuse and Violence Against Women and Girls.
- Input from Refuge and Loudmouth Theatre
- The Domestic Abuse workplace policy guidance is now hosted on the WCC safeguarding website.
- A digital bulletin which is emailed to all Warwickshire settings features ongoing updates including from the multi-agency risk assessment conference, Operation Encompass, Refuge and wider specialist support. The bulletin also promotes Safeline and Loudmouth Theatre both of which offer services to schools to support with VAWG and Domestic Abuse. It also signposts to meetings of the Sex, Relationships Education Network hosted by Connect for Health.
- Violence against Women and Girls and Domestic Abuse is now included in DSL training and DSL updates to schools/colleges, alternative providers and early years. Where appropriate, learning has been shared from Domestic Homicide Reviews, and the importance of training has been emphasised.
- Specific training sessions around Domestic Abuse have been provided for education professionals. In 2022/23, 67 settings received training, followed by 68 settings in 2023/24. Feedback on the training is extremely positive.
- Brook Training on managing harmful sexual behaviours has been delivered to 70 professionals from across Warwickshire this year.
   There are plans to continue to offer this free training in the academic year 24/25.
- Where the Education Safeguarding Team carry out site-specific safeguarding audits, settings are encouraged to use signage to promote awareness of domestic abuse for staff and parents/carers.

#### **Recommendation**

#### Local health partnerships

**R5.** Local Maternity and Neonatal System (LMNS) to endorse and support work at a strategic level to increase referral rates into Refuge from Maternity Services where existing levels are lower than expected.

#### **Progress**

- In the period January to June 2024, Coventry and Warwickshire Local Maternity and Neonatal System (CWLMNS) used their Complex Needs Pregnancy sub-group to complete a system wide deep dive into how our maternity system supports pregnant women experiencing, or at risk of Domestic Abuse.
- This multi-agency group took part in a collaborative session to understand both existing good practice and potential barriers to supporting pregnant women. This resulted in the development of a survey for midwives to understand Domestic Abuse specific training needs and a matrix document to compare differences and similarities in Domestic Abuse pathways across our three maternity trusts.
- The work undertaken was shared in a report for CWLMNS
   Board in November 2024 with recommendations around
   actions to improve the equity of offer across the health and
   care system for pregnant women and ensure Domestic Abuse
   remains a strategic priority for all CWLMNS partners.

#### **Glossary of terms**

#### **Annual Population Survey (APS)**

A survey in the UK, conducted by the Office for National Statistics, that gathers information from households to provide detailed data on social and job-related topics. It combines data from the Labour Force Survey (LFS) and other sources, collecting information from around 122,000 households and 320,000 people each year.

#### **Building blocks of health**

The social, economic, and environmental factors that affect people's health and wellbeing. Also known as Wider Determinants of Health.

#### **Built environment**

The human-made surroundings where people live, work, and engage in various activities. It includes buildings, roads, bridges, parks, and other infrastructure.

#### **Community Powered Warwickshire**

Warwickshire has adopted a community-powered approach by involving communities in decision making, working alongside communities to take practical action, and enabling communities to lead.

#### **Demand-responsive transport (DRT)**

A flexible service that provides shared transport (usually a bus) to users who specify their desired location and time of pick-up and drop-off and alters its routes accordingly.

#### **Dialogue tool**

An online platform where Warwickshire residents can share their ideas and feedback on community issues. It helps the Council gather input to improve services based on what people say. **Be part of the Warwickshire conversation – Warwickshire County Council** 

#### **Director of Public Health (DPH)**

The DPH is the system leader for improving the health and wellbeing of residents, reducing inequalities in health outcomes and protecting local communities from public health hazards (infectious diseases and environmental threats). The DPH is a statutory chief officer of the local authority and the principal adviser on all health matters to elected members, officers and partners, with a leadership role spanning health improvement, health protection and healthcare public health.

#### **Grassroots activity**

Action by residents to make change in their local community.

#### Health in All Policies (HiAP)

An approach where health is considered in all areas of policymaking to improve the health of everyone. This means thinking about health impacts when making decisions in different sectors like transportation, housing, and education.

#### **Health inequalities**

Health inequalities are unfair and avoidable differences in health across the population, and between different groups within society. These include how long people are likely to live, the health conditions they may experience and the care that is available to them.

#### **Integrated Care Board (ICB)**

A statutory NHS organisation responsible for planning and commissioning health services for a specific geographical area. ICBs manage the NHS budget and develop strategies to meet the health needs of the local population. Locally the ICB covers Coventry and Warwickshire.

#### **Integrated Care System (ICS)**

These are partnerships that bring together NHS organisations, local authorities, and other partners to plan and deliver health and care services. The goal is to improve health outcomes, reduce inequalities, and provide more coordinated care. Locally, the ICS covers Coventry and Warwickshire.

#### Place-based Health and Wellbeing Partnerships

Partnerships made up of key stakeholders working together to improve local health and wellbeing outcomes for each 'Place' (in Warwickshire this is North, Rugby and South). They were established in 2020 to support the delivery of Warwickshire's Health and Wellbeing Strategy. Given their roots in local areas, the Place-based Partnerships have a key role in leading and delivering on work aligned to wider determinants of health and place and communities.

#### Section 106

Section 106 of the Town and Country Planning Act 1990 allows local planning authorities to enter into a legally-binding agreement or planning obligation with a landowner as part of the granting of planning permission. These agreements are a way of delivering or addressing matters that are necessary to make a development acceptable in planning terms. They can be used to support the provision of services and infrastructure, such as highways, recreational facilities, education, health and affordable housing.

#### **Voice of Warwickshire Panel**

A panel that gives people who live in Warwickshire an opportunity to share their views on a variety of subjects. Results from surveys completed by panel members are given directly to decision makers within Warwickshire County Council, to assist them when making plans and decisions.

#### Voluntary, Community, Faith and Social Enterprise (VCFSE) Sector

The collective term for the many non-profit organisations and groups that exist to serve the communities they are rooted in.

#### Voluntary, Community, Faith and Social Enterprise (VCFSE) Sector Collaborative

The mechanism for connecting the local VCFSE sector with the Coventry and Warwickshire Integrated Care System to work together to improve health and wellbeing.



This year's report has been shaped by your feedback on what is most valued by the Warwickshire community. We value your voice and are committed to providing a space where you can share your ideas on how to make Warwickshire a community-led driver for health as part of the Power of the Possible. After watching the report, we invite you to join the conversation. We couldn't capture everyone's perspective, so if you feel your voice wasn't reflected, please share your thoughts using the Dialogue tool. We encourage you to tell us about the positive activities happening in your communities and neighbourhoods and what you would like to see going forward for a healthier Warwickshire.

The Dialogue tool is a monitored discussion forum. It is a space where you can leave an idea and interact with others by commenting and reacting. We are using this space to discuss the following topics:

What do you value about where you live?

What activities are happening in your local area?

What are you involved in that improves your health and wellbeing?

What have you taken from our video and would like to pledge to improve or focus on within your area?

What would you and your community need to strengthen your local connections and improve your health and wellbeing?

# Be part of the Warwickshire Conversation by signing up and finding out more here.

The Dialogue tool will be open for 2 months from Jan to March 2025. We want everyone to feel welcome, heard, and respected. Please post comments in line with our **moderation policy**. We will monitor the page and remove any responses that do not adhere to these guidelines. For more information about the Dialogue tool, privacy policy and terms of use please visit: **About the Dialogue – Warwickshire County Council.** 





#### Warwickshire County Council, Public Health

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warwickshire.gov.uk/publichealth