

# Report to Executive

Agenda  
Item:

**A.7**

Meeting Date: 11<sup>th</sup> March 2019  
Portfolio: Communities Health and Wellbeing  
Key Decision: No  
Within Policy and Budget Framework: No  
Public / Private: Public

Title: DRAFT JOINT CUMBRIA PUBLIC HEALTH STRATEGY  
Report of: The Deputy Chief Executive  
Report Number: CS 12/19

## Purpose / Summary:

To provide an overview of the Draft Joint Cumbria Public Health Strategy which describes wide ranging aims to tackle the wider determinants of health and wellbeing, in line with the draft Health and Wellbeing Strategy 2019-29 in preparation for adoption.

## Recommendations:

It is recommended that following the consideration of the comments from the Health and Wellbeing Scrutiny Panel, that the Draft Cumbria Joint Public Health Strategy is considered for adoption.

## Tracking

Executive:	<b>11<sup>th</sup> March 2019</b>
Scrutiny:	<b>21<sup>st</sup> February 2019</b>
Council:	

## 1. BACKGROUND

- 1.1 The Director of Public Health at Cumbria County Council (CCC) has led on the creation and development of the Cumbria Joint Public Health Strategy. Officers with multi-disciplinary backgrounds and expertise from Carlisle City Council, the other district councils, Cumbria County Council and the Lake District National Park have contributed to the writing and the shaping of specific thematic areas, as discussed at Cumbria Leaders board.
- 1.2 The Public Health Strategy sits under the Joint Health and Wellbeing Strategy 2019-29. This strategy is currently in production (consultation ended 31<sup>st</sup> January 2019), and will be going to the Cumbria Health and Wellbeing board in April. This is a document which sets out how the Health and Wellbeing Board will work together over the next ten years. All Clinical Commissioning Groups, local authorities and NHS England plans should take the Joint Health and Wellbeing Strategy into account.
- 1.3 The vision of the Cumbria Joint Public Health strategy is to: *“enable Cumbrian communities to be healthy and to tackle health inequalities”*. This corresponds with the Carlisle Plan, Carlisle Partnership and Carlisle Healthy City activity.
- 1.4 This Cumbria Joint Public Health strategy takes a different approach to previous public health strategies as it acknowledges the conditions in which a person is born, lives, grows, learns and works, and considers impacts on their access and ability to live a healthier life. These are known as the wider determinants of health, and includes housing, education, employment, working conditions, the natural environment, food production and water. These are incorporated into figure 1. Estimates vary, however it is broadly accepted that health care is accountable for approximately 10% of the contribution to our health and 10% genetics. This means that whilst access to good quality health care is very important, health is primarily determined by socio-economic and lifestyle factors (80%). This provides a huge opportunity to influence and improve health and wellbeing.
- 1.5 The above additionally builds on the good work Carlisle has done in regard to the World Health Organisation Healthy City agenda, the wider determinants of health and council services aligned to these determinants. The next phase of Healthy City (phase 7) outlines 6 themes (6Ps) which are:
  - Investing in the **‘people’** who make up our cities
  - Designing urban **‘places’** that improve health and wellbeing
  - Greater **‘participation’** and partnership for health and wellbeing

- Improved community '**prosperity**' and access to common goods and services
- Promoting '**peace**' and security through inclusive societies
- Protect the '**planet**' from degradation, leading by example, including through sustainable consumption and production.

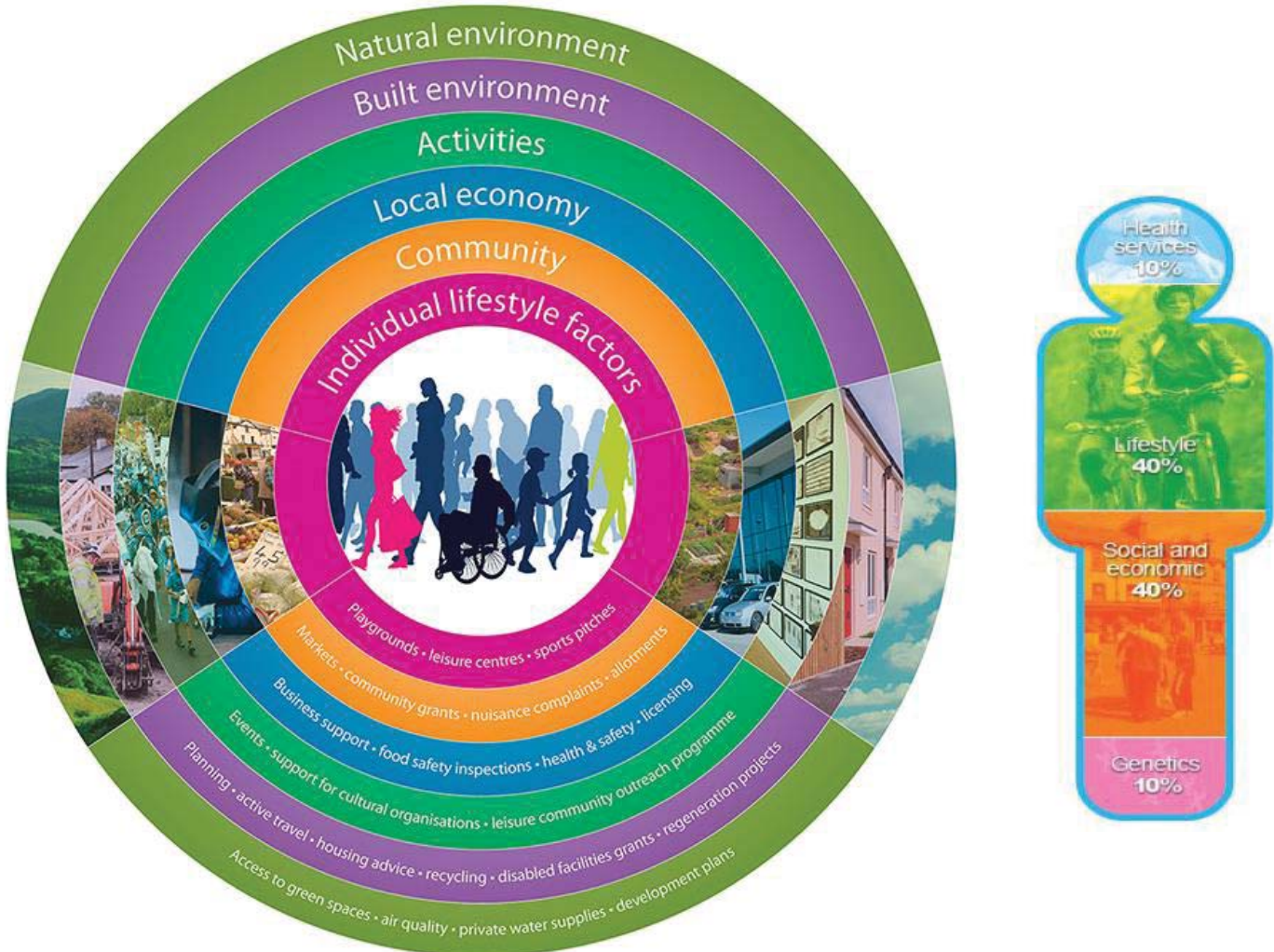
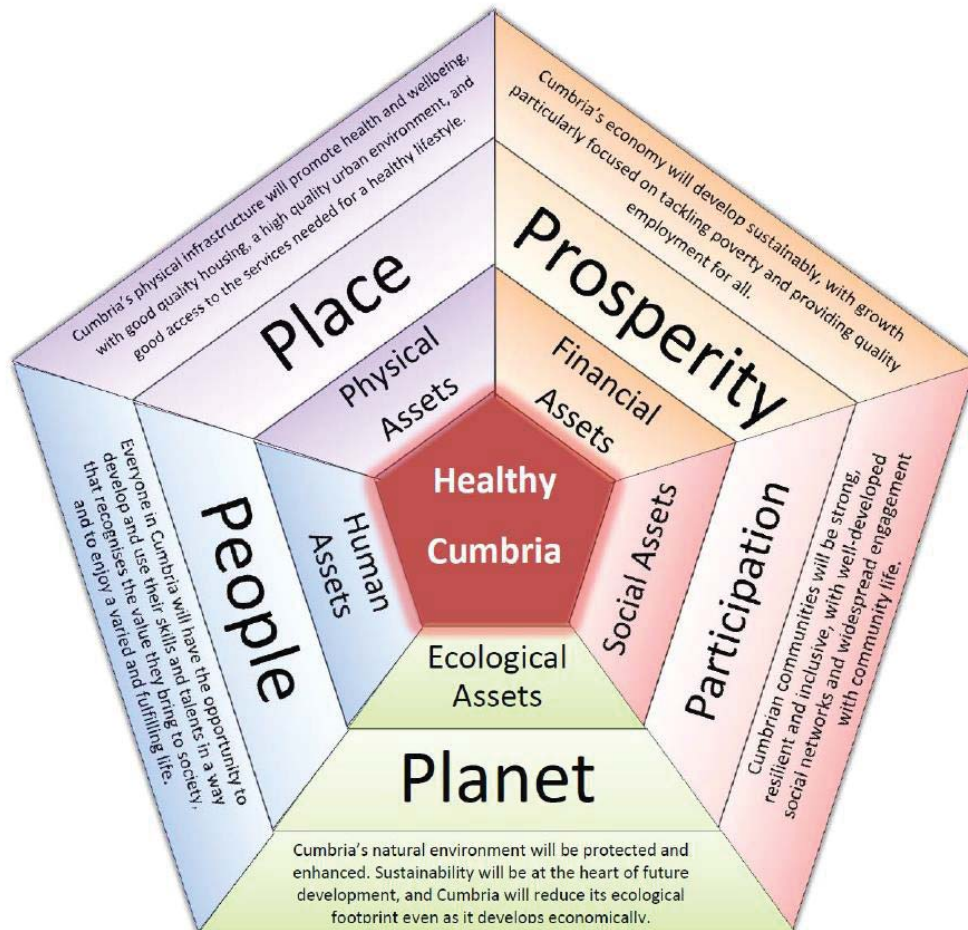


Fig 1. Wider determinants of health referencing district council activity

- 1.5 The framework of the draft Cumbria Public Health Strategy is based on the “*Five Capitals Model*”. This includes the following and links to Healthy City phase 7 and the 6Ps (fig 2).
- Natural Capital (Planet):** A high quality natural environment that provides opportunities for engagement with the natural world.
- Human Capital (People):** People with the skills, knowledge, and experience that give them the capacity to take part in society and have meaningful and fulfilling lives.
- Social Capital (Participation):** A good social infrastructure, with networks and institutions that allow people to connect to each other.

**Physical Capital (Place):** A good physical infrastructure including housing, transport, and a commercial environment that promotes healthy behaviours.

**Financial Capital (Prosperity):** Adequate financial resources that are fairly distributed.



*Fig 2. A Future for a Healthier Cumbria*

## 2. PROPOSALS

- 2.1 This strategy provides a strong framework which demonstrates the cross-cutting nature of the work Carlisle City Council undertakes. Adopting this strategic approach will improve the Council's contribution to promoting, enabling and providing services which improve the health and wellbeing of our communities.
- 2.2 The aims outlined in the strategy are very ambitious, and achieving them is a matter for all of us. It sets out the aspirations of partners and a commitment to work towards these over the long term, and encourage others to work towards them, within the constraints that all agencies face. Health is everyone's business.



- 2.3 The draft Joint Cumbria Public Health Strategy correlates strongly with the Carlisle Plan, via themes such as: health and wellbeing, housing, economy, education and skills, culture and leisure, environment; as well as cross cutting multidisciplinary partnership working. These are all incorporated within this strategy.
- 2.4 The new draft Joint Cumbria Public Health Strategy has been co-written by the Cumbrian local authorities and other partners. This strategy provides a well-developed framework for actions on the wider determinants of health. It includes many aims which correlate with our own council plan. Due to its wider determinants focus it is an appropriate strategy for a district council to adopt.
- 2.5 Implementation of the strategy will require a collaborative cross-organisational approach, bringing together different sectors and specialisms. Following adoption, Carlisle City Council with other local authorities will work with partners on developing an approach to implement the strategy with the support of the Healthy City Forum. The forum would need to mirror the different aspects of health which are included in this strategy and provides the opportunity to refocus and reengage.
- 2.5 The draft Joint Public Health Strategy aligns with future Healthy City ambitions and the key themes within phase 7 which are the 6Ps (People, Places, Participation, Prosperity, Peace and Planet).

### 3. **RISKS**

- 3.1 Lack of implementation.
- This could mean that the ambitions of the Strategy are not realised.
  - Leadership, coordination and partnership working would be required to ensure implementation and delivery.
- 3.2 Lifestyle drift (where a policy sets out an ambition to tackle health inequalities through the social wider determinants of health (upstream), but drifts to downstream lifestyle/behavioural measures).
- This could mean that there are no or negative changes to inequalities and deprivation.
  - Public health education is required to ensure that challenge can occur if lifestyle drift is seen. A mix of upstream and downstream measures will be required. Partnership working and leadership is also key to this.

### 3.3 High level agenda with a large number of priorities

- This could hinder progress
- To counter this, priorities for Carlisle would need to be agreed using an evidence-based approach and working closely with partners to implement. Communication will also be key to this.

### 3.4 Conflict with Healthy City agenda

- This could confuse agenda's and limit resource available
- The Healthy City agenda fits in and aligns with the World Health Organisations 6Ps (Planet, People, Participation, Place, Prosperity and Peace) and the Assets models of the document as visible on page 29. This will need to be further strengthened via the Healthy City Forum. It allows for a refocus and refresh of this agenda.

## 4. **CONSULTATION**

### 4.1 The Draft Public Health Strategy will be considered by the following groups:

- Cumbria Health and Wellbeing Board
- Public Health Alliance
- Cumbria Chief Executive's Group
- Cumbria Leader's Board
- CCC Cabinet and Council
- Carlisle Partnership
- Carlisle Healthy City Forum
- The other Cumbrian district's Cabinets and Councils.
- Carlisle City Council Health and Wellbeing Scrutiny panel.

### 4.2 On 3<sup>rd</sup> December 2018 the Carlisle Partnership Executive considered both the Cumbria Health and Wellbeing Strategy and the emerging Draft Joint Cumbria Public Health Strategy. Please see the appendices for the excerpt from the Carlisle Partnership Executive.

### 4.3 On Thursday 21<sup>st</sup> February Carlisle City Council's Health and Wellbeing Scrutiny panel considered the Draft Joint Cumbria Public Health Strategy. Please see the appendices for the excerpt from Health and Wellbeing Scrutiny.

## **5. CONCLUSION AND REASONS FOR RECOMMENDATIONS**

- 5.1 The draft Joint Cumbria Public Health Strategy correlates strongly with the Carlisle Plan, via themes such as: health and wellbeing, housing, economy, education and skills, culture and leisure, environment; as well as cross cutting multidisciplinary partnership working. These are all incorporated within this strategy. There are also strong links with council services below the plan.
- 5.2 Not adopting the new county wide Public Health Strategy. This would not be the recommended option as it would mean Carlisle is working towards a separate public health strategy and framework to the rest of the county.

## **6. CONTRIBUTION TO THE CARLISLE PLAN PRIORITIES**

- 6.1 The draft joint Cumbria Public Health Strategy contributes to all elements of the Carlisle Plan.

The overall Vision: “To improve the health, wellbeing and economic prosperity of the people of Carlisle. We will work in partnership to further establish our position as the regional centre and focus for investment, ensuring that residents can share in the benefits through increased opportunities and greater choice of jobs, range of housing and a quality environment.”

“Support business growth and skills development to improve opportunities and economic prospects for the people of Carlisle.”

“Further develop sports, arts and cultural facilities to support the health and wellbeing of our residents.”

“Continue to improve the quality of our local environment and green spaces so that everyone can enjoy living, working in and visiting Carlisle.”

“Address current and future housing needs to protect and improve resident’s quality of life.”

“Promote Carlisle regionally, nationally and internationally as a place with much to offer – full of opportunities and potential.”

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**Appendices attached to report:** The draft joint Cumbria Public Health Strategy, excerpt from Carlisle Partnership Executive and excerpt from Health and Wellbeing Scrutiny panel.

## **CORPORATE IMPLICATIONS:**

**LEGAL – None**

**FINANCE –** There are no direct financial implications from this report and any costs will be met from existing budgets

**EQUALITY – None**

**INFORMATION GOVERNANCE – None**



# Cumbria Joint Public Health Strategy:

## Tackling the Wider Determinants of Health and Wellbeing

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<b>Date</b>	6 February 2019

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# Cumbria Joint Public Health Strategy: Tackling the Wider Determinants of Health and Wellbeing

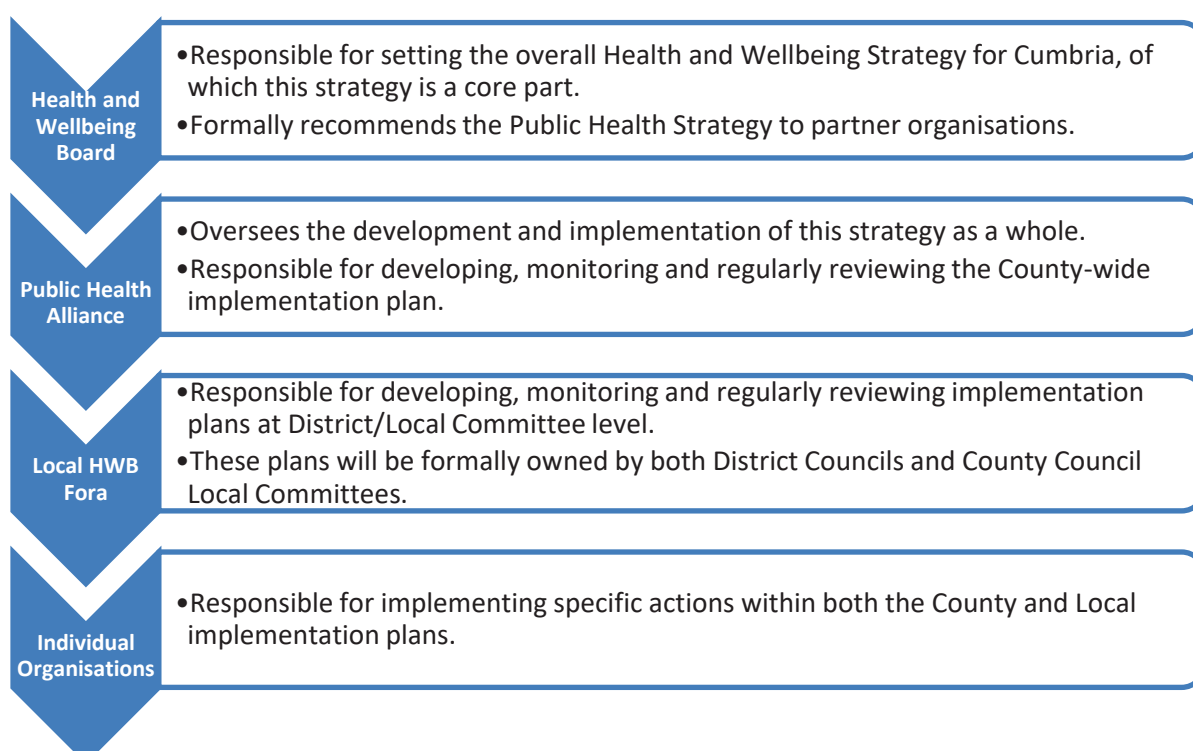
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## Introduction

This strategy has been developed by the Cumbria Public Health Alliance, which includes partners from across local government, the health service and the third sector. It describes the shared ambition of these partners to help bring about the environmental, social and economic conditions that can best support Cumbrian residents to enjoy a healthy and happy life.

The aims outlined in this document are very ambitious, and achieving them is not simply a matter for the partners who have signed up to the strategy. Many of the key themes are influenced significantly by national and even international economic and political forces, and by the action of individuals as well as a wide range of private sector organisations, so there is no guarantee that the aims set out in this document can be achieved. The strategy therefore reflects the aspirations of partners and a commitment to work towards these over the long term, and to encourage others to work towards them, within the constraints that all agencies face.

Moving towards achieving these aspirations will take concerted action at many levels, including work to influence national policy. Some of this action will need to be taken at the level of the whole County, while other work will take place at a more local level: much of the implementation of the strategy depends on the work of District Councils. Consequently this strategy will be supported by a range of action plans, developed and implemented at different levels, as follows:



Key to the implementation of this strategy will be the development of mechanisms for working together and for assessing how decisions that are being made influence the aims set out in this strategy. Some of these mechanisms, such as the Public Health Alliance and the Local Health and Wellbeing Fora, are in place already but will be refreshed to enable them to develop local action in support of the strategy.

In setting all the aims within this strategy, all partners recognise that there are significant constraints currently facing us. These include the powers available to local organisations, and significantly challenged budgets particularly within local government and the NHS, with knock-on impacts on the third sector. Achieving these aims in this environment will be extremely challenging, but our commitment as partners to this strategy is to make the best use of the limited powers and resources available to work towards these aims.

## Strategic Context

The Cumbria Health and Wellbeing Strategy 2019-29 sets as its overarching vision: ***[Drafting Note: to be confirmed following consultation on that strategy]***

*“To enable Cumbrian communities to be healthy and to tackle health inequalities”*

The factors that impact on people’s health and wellbeing are many and varied, and the strategies that are used to improve health and wellbeing therefore also need to be diverse and to address a number of different influences. Recognising this, the Health and Wellbeing Strategy identifies four key themes: ***[DN: to be confirmed following consultation on that strategy]***

- Protecting the health of the population as a whole
- Improving health and wellbeing throughout the lifecourse
- Tackling the wider determinants of health and wellbeing
- Providing high quality, person-centred care.

Obviously public health is ultimately about people; however public health action does not just focus on individuals, but on social, economic, environmental and structural issues, as these have direct and indirect impacts on health and wellbeing. Consequently the overall public health approach for Cumbria can be seen as having three main strands, connected to three of the four key themes of the Health and Wellbeing Strategy.

**Health protection** remains a core part of the public health agenda and like all parts of public health has a significant multi-agency dimension. Screening and immunisations are commissioned by NHS England and delivered by local health services; communicable disease control involves significant joint efforts by the County Council public health team, District environmental health departments and Public Health England, among many others; and Emergency Planning and resilience is co-ordinated through the multi-agency Local Resilience Forum.

Over recent years, much public health activity has had an individual focus. The **life course approach** (starting well, developing well, living well, ageing well and dying well) is being used as a core component of the health and wellbeing frameworks for the two emerging Integrated Health and Care Partnerships in West, North and East Cumbria and Morecambe Bay. Action that focuses on working with individuals, for example in supporting them to stop smoking, eating a more healthy diet, reducing alcohol consumption and being more

physically active, as well as individual support for mental wellbeing, is more fully outlined in these health and wellbeing frameworks.

However public health action is also required at a broader social, environmental and economic level. Variation in access to or quality of the **wider determinants** of health and wellbeing is the single biggest driver of health inequalities and influences an individual's health behaviour.

It is the third of these strands, creating the conditions in which individuals can have opportunities to be healthy and to take action in support of their own health and wellbeing, that is the focus of this strategy. In line with the timeframes for the Health and Wellbeing Strategy, this strategy covers the period 2019 – 2029.

Clearly these three main strands of work have inter-connections and overlaps; this is not a neat division. In particular, the wider determinants shape individual behaviour: diet, for example, is influenced both by individual factors such as attitudes and knowledge, and by social factors such as food availability, marketing and culture. This strategy therefore cannot stand alone as the way of improving health and wellbeing in Cumbria, but has to be seen alongside other plans that focus on working with individuals to influence mindsets and behaviours, as illustrated in Figure 1 overleaf.

## Model of the determinants of health and wellbeing

This strategy is adapted from the “five capitals” model proposed by Forum for the Future as a framework for sustainable systems (see Appendix 1). Interpreted for the purposes of a public health strategy, this model suggests that a community is healthy and sustainable when it has:

**Natural assets:** A high quality natural environment that provides opportunities for engagement with the natural world.

**Human assets:** People with the skills, knowledge, and experience that give them the capacity to take part in society and have meaningful and fulfilling lives.

**Social assets:** A good social infrastructure, with networks and institutions that allow people to connect to each other.

**Physical assets:** A good physical infrastructure including housing, transport, and a commercial environment that promotes healthy behaviours.

**Financial assets:** Adequate financial resources that are fairly distributed.

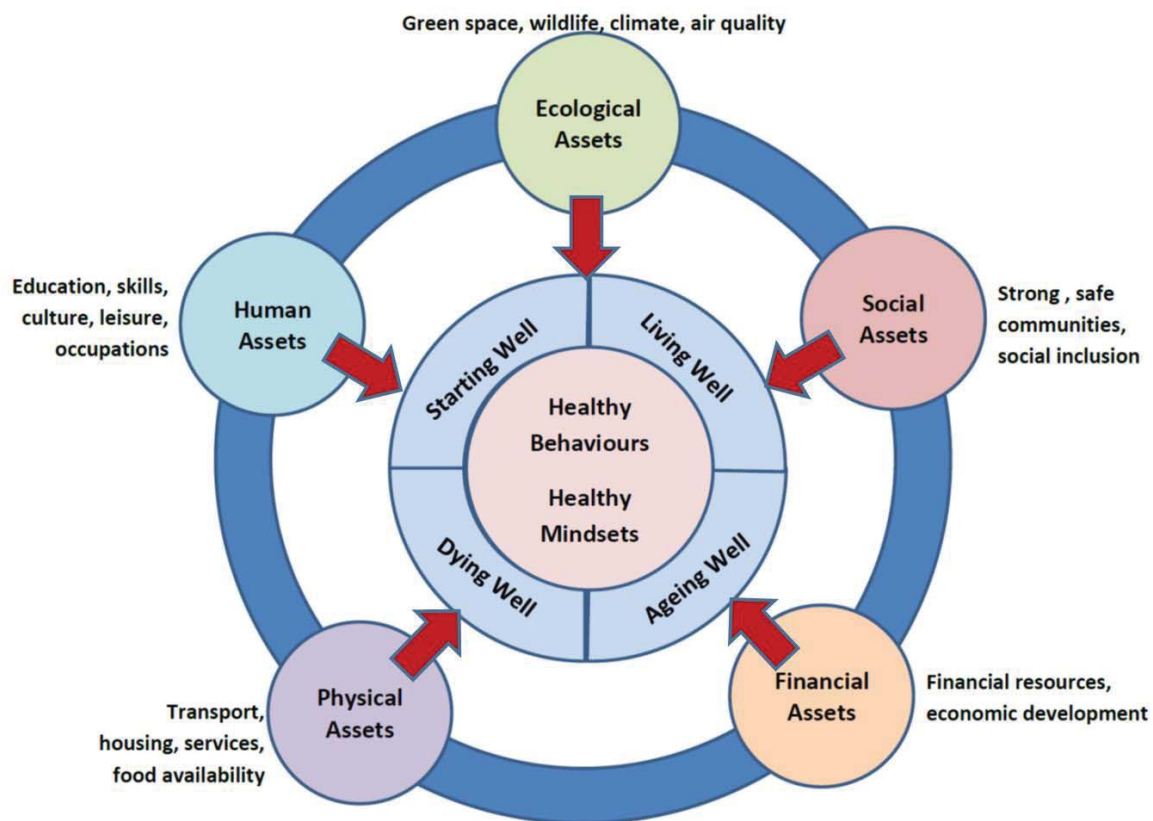


Figure 1: Determinants of Health and Wellbeing

A key feature of this model is that it emphasises the importance of building all five types of community assets without degrading any of them. It therefore sets a positive vision of building a better society in which everyone is able to maximise their potential for health and wellbeing.

This can however be challenging in reality, as often there are actual or perceived competing demands. In particular, the requirement for increased housing or business infrastructure can compete with the desire to protect natural assets. So too can economic growth, which relies on all the other assets but can damage them if not thoughtfully and carefully pursued. This strategy therefore commits policy and decision makers to consider all these factors in the round when assessing proposals for action.

#### Key Commitment

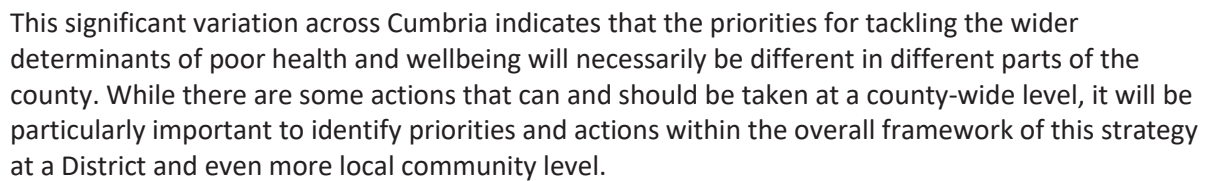
We will ensure that our decision making takes full account of the environmental, social, human, physical and financial assets described in this strategy. We will endeavour to ensure that our decisions and actions grow these assets sustainably, and where that is not possible, we will attempt to offset any negative impact through action elsewhere, for the health and wellbeing of all Cumbria's communities.



Clearly these various assets are not evenly distributed throughout our County. Many parts of Cumbria have a natural environment second to none; however some of our urban areas suffer from poor air quality. There are clear pockets of deprivation linked to low income and skills, particularly in some urban areas, whereas it is often our more rural areas that have difficulty accessing goods and services. Such differences in poverty, power and resources, exposure to health damaging environments, and opportunities in early life are the main drivers of health inequalities. Unhealthy behaviour such as smoking, inactivity, violence and poor diet is more common in communities that have less access to and control over these assets.

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## Vision for a Healthier Cumbria

Building on the five capitals and taking inspiration from the World Health Organization's Healthy Cities model, the future for a healthier Cumbria can be seen as having five key components:

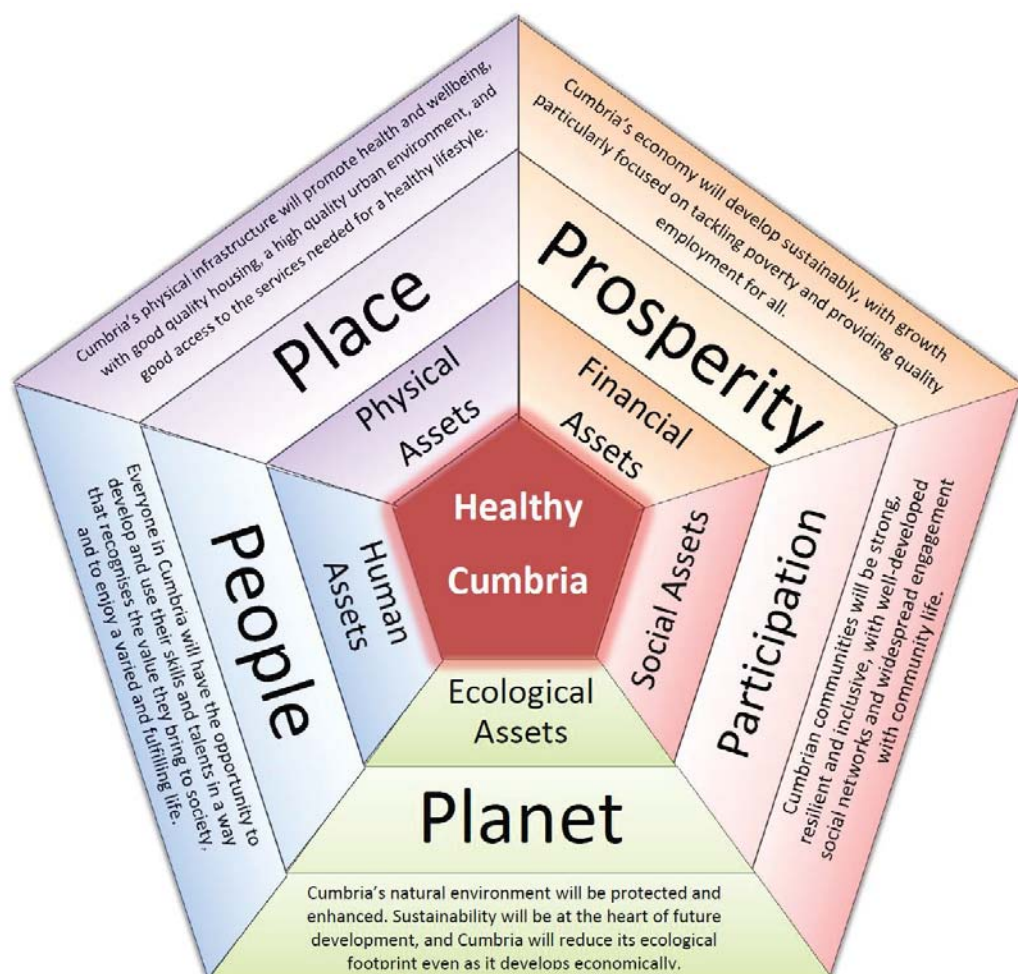
**Planet:** Cumbria's natural environment, from our world-class landscapes to the centre of our towns, will be protected and enhanced. Sustainability will be at the heart of future development and Cumbria will reduce its ecological footprint even as it develops economically.

**People:** Everyone in Cumbria will have the opportunity to develop and use their skills and talents in a way that recognises the value they bring to society and to enjoy a varied and fulfilling life.

**Participation:** Cumbrian communities will be strong, resilient and inclusive, with well-developed social networks and widespread engagement with community life.

**Place:** Cumbria's physical infrastructure will promote health and wellbeing, with good quality housing, a high quality urban environment and good access to the services needed for a healthy lifestyle.

**Prosperity:** Cumbria's economy will develop sustainably, with growth particularly focused on tackling poverty and providing quality employment for all.



## Planet: Growing our Natural Assets

The global ecosystem is not just the environment in which we live: it is the basis of our society and our economy. A range of natural resources such as land, water, air, timber and animals, and natural processes such as the water cycle and climate regulation, influence our health. But they have to be utilised sustainably in order to ensure that people can have a good quality of life today and to avoid damaging the prospects of future generations.

In the context of this public health strategy, the key aspects of our natural resources that need to be addressed are as follows:

- **Improving the quality of and access to green space**
- **Promoting biodiversity and wildlife habitats**
- **Climate change**
- **Air quality**
- **Waste reduction**

### Improving the quality of and access to green space

Cumbria has a plethora of diverse green and blue spaces, from rugged high open fells, rolling farmland, woodland, coastal plains and beaches, with a variety of village, town and city parks, recreation grounds, community gardens, cemeteries and churchyards. These spaces play a vital role in the in the health and wellbeing of local communities and provide valuable ecosystem services such as food, fuel and flood management.

Green and blue space has many public health benefits. Often free to access, it promotes physical activity through providing a pleasant environment for walking, running, cycling and recreational activities, improving health and mental wellbeing. Urban green spaces provide pleasant areas to relax and socialise, promoting greater levels of social activity and stronger neighbourhood relationships. This can help in combatting isolation and loneliness. Spending time in green spaces has been shown to produce levels and patterns of chemicals in the brain associated with low stress and positive impacts on blood pressure.

Although Cumbria is rich in green and blue space it is vital to maintain and where necessary improve its quality, its distribution and access to it. Currently, some people are disadvantaged in terms of the benefits they can derive from it, either through financial circumstances, the area they live in or access to transport.

#### **Key Aim**

To protect and enhance Cumbria's green and blue spaces, ensuring that everyone in the County has good access to a high quality natural environment.

### Promoting biodiversity and wildlife habitats

There is an increasing amount of evidence that connections with nature and other forms of life can have a significant beneficial impact on health and wellbeing. Consequently it is important for public health to plan positively for the creation, protection and enhancement of biodiversity and wildlife habitats.



We need to develop the core of a county-wide Nature Recovery Network, so we can plan for and encourage wildlife and habitats back into our towns, countryside and coastline through initiatives such as wildlife-friendly gardens, green roofs, tree planting, species-rich roadside verges and marine protection. This will enable habitats to spread, wildlife to flourish and increase the number of people who can benefit.

One of the key areas for promoting and safeguarding biodiversity and wildlife habitats will be through engagement with the next generation of young people and children. Cumbria will continue to develop its work with a wide spectrum of conservation and farming groups and the health sector to provide support for schools and community groups to make it easier to learn outdoors and to visit natural places through awards and initiatives run by those such as the John Muir Trust and Forest Schools.

#### Key Aim

To promote Cumbria's biodiversity through protection and enhancement of a wide variety of wildlife habitats.

## Tackling climate change

Climate change is already a threat to Cumbria, and in the long term is one of the greatest threats to public health globally. Within Cumbria, climate change is likely to have a range of impacts. We can expect to see wetter winters, hotter, drier summers, rising sea levels and a greater likelihood of extreme weather events. The severe floods of 2005, 2009 and Storm Desmond in 2015 were consistent with predictions for climate change and caused significant disruption and damage. In 2010, the north west experienced its driest January to June since 1929, resulting in low reservoir levels and hosepipe bans across north west England, affecting six million consumers. These extreme weather events can present an immediate threat to life, property and health and can also have a long term physical, emotional and financial impact on lives, with significant health consequences.

Obviously Cumbria cannot tackle climate change alone – this is a global problem. However it is important for us to take action locally both to reduce our contribution to the problem and to mitigate the inevitable impacts. In 2010 the Lake District National Park was one of the first areas to set itself a local carbon budget and to monitor annual reductions – something that could be valuably adopted in the whole of Cumbria. The 2018 report of the International Panel on Climate Change recommended that in order to limit global climate change to 1.5°C the world should reduce net carbon emissions by 45% by 2030 and be carbon neutral by 2050. There is no reason why Cumbria should be exempt from timescales of this sort – and indeed why we should not seek to go further, faster.

The health of Cumbria's green space and its associated biodiversity and wildlife habitats will help to build resilience to counter the extreme weather associated with climate change. There is an opportunity to do more on green and blue space infrastructure through the local planning system, including providing urban cooling, local flood risk management, carbon sequestration and local access to shady outdoor space through planting more trees.

#### Key Aim

To become a "carbon neutral" County and to mitigate the likely impact of existing climate change.

## Air quality

The impact on health of poor air quality can be significant and goes beyond respiratory health. People who live in poorer areas are often exposed to higher levels of air pollution and may suffer greater negative impacts. As a mainly rural county, Cumbria is generally favoured with very good air quality: the proportion of mortality attributable to particulate matter air pollution in Cumbria is 3.82%, lower than the national figure of 4.72%. Only Carlisle and South Lakeland have declared any Air Quality Management Areas (AQMAs). These are places where national air quality objectives are not likely to be achieved. Those in Cumbria have all been declared as a consequence of raised levels of nitrogen dioxide (NO<sub>2</sub>), primarily due to emissions from road transport.

However, several other areas in Cumbria have levels of air pollution approaching threshold levels and there are concerns that levels may be rising, with the popularity of biomass boilers, wood-burning stoves and solid fuel use in rural, off-grid areas. For PM<sub>2.5</sub> (particulate of less than 2.5 microns) in particular, there is no safe level and it has been estimated that in 2010 the deaths of 195 people in Cumbria were attributable to PM<sub>2.5</sub>.

Action to address the causes and mitigate the consequences of air pollution needs to be taken at all levels of society from Government through to the individual, and these actions will vary depending on the most important influences over air quality at a local level. There is often a tension between a desire for good air quality and economic development objectives, which can also improve health. Major new housing projects, industrial and commercial developments and roads can all impact on air quality either through direct emissions or through increasing traffic levels.

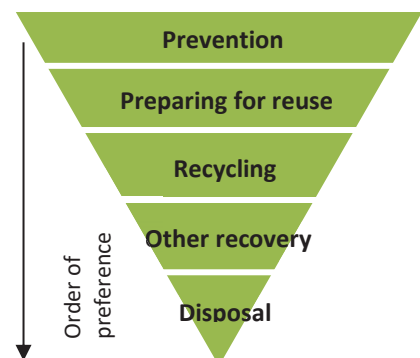
Improving air quality requires both large systemic changes to reduce industrial emissions and traffic and to encourage the use of less polluting vehicles, and action at community level to change behaviours. Where local people have been part of decisions made about interventions, they are more likely to be engaged and thus change their behaviour. Communities that better understand air pollution can become powerful advocates for action and improvement in their local area.

### Key Aim

To improve air quality in Cumbria through action on transport, industrial, agricultural and domestic emissions.

## Waste reduction

Cumbrians produce almost 250,000 tonnes of rubbish every year. Reducing the amount of waste generated not only reduces the environmental impact and financial burden to local authorities, but often leads to increased household disposable income, healthier dietary habits and improved well-being. Cumbria generates 50,000 tonnes of garden waste, much of which could be composted at home, encouraging physical activity and fresh air. An equivalent of £50 of food is thrown away per household each month. Better portion planning can reduce waste and reduce grocery bills, freeing up money to spend on activities that promote health and well-being.





**Key Aim**

To reduce the amount of waste produced in Cumbria through reduced material use, promoting greater product re-use, and improving recycling rates.

## People: Nurturing our Human Assets

The assets within our communities relate to the people's skills, knowledge and experience the things they draw on every day in living and contributing to society. This includes their capacity for things like empathy, passion and joy and also their intellectual output such as art and other cultural expressions. We can nurture our human assets by:

- **Promoting education, skills and lifelong learning**
- **Ensuring meaningful and high quality occupations for all**
- **Ensuring access to adequate leisure opportunities**
- **Promoting engagement with arts and culture**
- **Tackling discrimination and exploitation**

### Promoting education, skills and lifelong learning

There is a direct correlation between the areas of the County with the lowest educational attainment and skills levels, unemployment and poor health. Supporting people to access employment through action to improve skills is therefore a critical part of this strategy. In addition, lifelong learning has health benefits that go beyond the impact on employment: learning for its own sake is positive for mental wellbeing.

Improving the skills of the population to enable employers and the economy to access the workforce they require, both through education and through adult skills training and re-skilling, will be a critical part of the people strand of the Local Industrial Strategy (LIS), but will also play a major part in the other strands.

Cumbria faces a number of challenges in this area:

- There is a small pool of residents with graduate level qualifications, who are spread across separate labour markets;
- The percent of population with no qualifications, at 15.3% is higher than the national average, with areas of the coastal belt as high as 17.6%;
- Very strong apprenticeship performance, however there are emerging challenges in maintaining this, mirroring the national reduction in starts.

In developing the skills aspect of the Local Industrial Strategy, the Local Enterprise Partnership (LEP) has developed a series of sector skills plans outlining the skills challenges and shared areas for development in: Advanced Manufacturing; Nuclear; Health and Care; Construction; Logistics; Visitor Economy; Rural; Professional Services; Cultural and Creative Industries. The LEP has now established with partners a Careers Strategy for Cumbria that will drive improvements in education and business links, enthusing our young people about the opportunities available in Cumbria and enhancing examples of high quality partnership work between employers and education institutions. This approach will ensure that young people are encouraged to aspire from an early age and have a clear view of the careers available to them, so that they can plan their education accordingly. This approach when tested elsewhere delivered a significant improvement in attainment.

Work will be undertaken with education and training partners to develop an extended curriculum that both meets the needs of industry and the needs of residents, ensuring that there is choice available and a range of support to ensure that those who find accessing skills provision difficult are able to do so, securing the inclusive growth aspiration within the LIS.

**Key Aim**

To reduce disparities in educational attainment and to increase the proportion of the workforce with higher level skills and qualifications.

## Ensuring meaningful and high quality occupations for all

An occupation that gives life a sense of purpose and value is an essential part of positive wellbeing. For many people this will of course come in the form of employment, which also brings the economic resources necessary for good health. However other forms of occupation, such as volunteering or bringing up a family, can be just as powerful for improved wellbeing and should not be ignored as a way of bringing this purpose and value to life.

In general, having a job is better for health than not having one, but poor quality jobs can be damaging to health. High quality employment will provide people with security, a good sense of job control and a reasonable balance between the effort they have to put in and the reward (financial or otherwise) that they get in return. Where these factors are not present, health is more likely to suffer.

It is recognised that currently not everybody is benefitting from Cumbria's economic prosperity with the wealthiest parts of the county not being those with the highest earnings and those areas with the highest weekly earnings experience higher rates of unemployment, deprivation, low skills and poor health. Equally, there is a gap in high quality, flexible/part time jobs that allow people to transition back into work around bringing up a family, or other caring responsibilities.

The Local Industrial Strategy has therefore identified the need to tackle worklessness and under employment with a more coherent employability and social cohesion offer. This will be a co-ordinated multi-agency programme delivered at a local and potentially community-level, based on experiences gained in tackling inter-generational worklessness in other areas. This approach could bring around 4,500 people back into the workforce, helping to address labour supply issues and improve people's quality of life and wellbeing.

**Key Aim**

To ensure that everyone in Cumbria has the opportunity for high quality employment or other meaningful activity as part of their daily life.

## Ensuring access to adequate leisure opportunities

People's leisure helps shape their mental and physical health. The health benefits include opportunities to be active, through sport and other physical activities, but also to be creative and to engage with friends, which can promote mental well-being. Not only are hobbies fun, but they can refresh the mind and body and assist one in improving self-esteem, staying healthy, active and happy. Taking part in leisure activities as a family is also beneficial for children because the process helps to model healthy ways to handle stress and emotions. Participating in leisure activities regularly reduces depression: in fact, just thinking about past outdoor recreation experiences can often improve one's mood.

Leisure is often referred to as "free time", because leisure time is free from compulsory activities such as employment, running a business, household chores, education and other such day-to-day activities. People need both enough time for leisure and access to a range of leisure opportunities,

whether formal or informal. Leisure provides people with the chance to find balance in their life, it also puts them in control of how they spend their time. People on low incomes are likely to have less control over their free time, have less access to recreational space and have less disposable income to spend on leisure.

**Key Aim**

To ensure that all communities in Cumbria have good access to a wide range of leisure opportunities, including promoting improved availability and affordability of leisure options.

## Promoting engagement with arts and culture

It is widely recognised that experiencing arts and culture can create a sense of wellbeing and transform quality of life for individuals and communities. The report *Creative Health: the Arts for Health and Wellbeing*, prepared by The All Party Parliamentary Group (APPG) for arts, health and wellbeing, details various ways in which the arts can enable people to enjoy better health and quality of life. It sets out the significant contribution that arts and culture can make to keeping people and communities healthy and happy: that arts engagement can improve mental health, help with the management of long term health conditions, promote healthy ageing, tackle health inequalities and begin to address obesity. It makes a powerful case for the arts and culture to contribute to the wider health and social care agenda helping people to live healthier lives.

Cumbria has a rich, diverse cultural and arts offer: a 'cultural landscape' shaped by the area and its arts and cultural heritage. People take part in everyday creativity like music, drawing, painting, film making, photography, pottery, singing and crafts. Many attend cultural events in community spaces, theatres, galleries, heritage sites, libraries, museums, venues, at outdoor locations and in our world heritage sited and spectacular landscapes. However it is recognised there are inequalities in the level of cultural and arts engagement and participation across Cumbria. For some residents access to the arts is limited by age, transport, rurality, disability or low income. Our ambition is for Cumbria to be a county that is recognised for the part played in making the arts and culture central to the health and wellbeing of its communities, and to promote awareness of the range and quality of opportunities that exist for people to be creative, to participate and enjoy the arts and culture.

**Key Aim**

To encourage a wide range of high quality opportunities to participate in and engage with the arts and culture, and to enable great art and culture for everyone so that participation and engagement in the arts is not dependent on where people live or their social, educational or financial circumstances.

## Tackling discrimination and exploitation

Discrimination is when a person is treated worse than another person on account of an aspect of their identity. Discrimination can take place at work, in the community, when travelling, when accessing public services, or as a consumer. Groups with a history of discrimination will often be disproportionately affected by poorer educational, health and employment outcomes, more likely to be in the children care system and later in the criminal justice system and are likely to have less voice in local democracy.

Many people who have experienced discrimination will have been victims of harassment, victimisation or a hate crime. In the wake of the MeToo movement there has been a greater

spotlight on sexual harassment and its damaging impact. Hate crimes are any offence where the victim perceives themselves to have been targeted on the grounds of their identity. In Cumbria there are over 300 reported hate incidents per year. Over 60% of all hate crimes in Cumbria are racist, reflecting the national trend, but there are a number of disablist, homophobic and transphobic hate crimes.

Domestic abuse has an overwhelming impact on women and girls and the sexist element of the violence and coercion needs to be treated on a par with the racist and homophobic elements in hate crime.

Exploitation in the forms of human trafficking, modern slavery and child sexual exploitation are growing concerns across the country as a whole and Cumbria is not immune to this trend. The agriculture and hospitality sectors are, nationally, key focal points for modern slavery and with these playing such a large part in the Cumbrian economy it would be naïve to think that it could not happen here.

Cumbria faces some key challenges in tackling discrimination and exploitation, including:

- **Sex:** Reducing number of women who are victims of domestic abuse; reducing numbers of women who are given custodial sentences; reducing occupational gender segregation so more women go into male dominated jobs and vice versa; reducing the gender pay gap; greater participation in physical activity compared to males; raising awareness of sexual harassment; support to community level women's groups to have a greater voice in public life, including female political representation.
- **Transgender:** Developing a socially inclusive approach that supports people identifying as transgender in education, employment and community life; working regionally to increase access to NHS services for people seeking medically to undergo gender reassignment.
- **Race:** Successful community integration, reduction in hate crime, effective access to English language support and culturally responsive public services.
- **Disability:** Greater accessibility in terms of transport, buildings, infrastructure and countryside; employers understanding reasonable adjustments; monitoring impact of welfare reforms on disabled claimants; raising awareness of disability hate crime.
- **Sexual orientation:** Helping to develop a vibrant LGB community through Cumbria Pride and other local activities; using the Stonewall national employer champions standard to promote LGB equality at work; support health and social care to consider aging well for people in same sex relationships.

#### Key Aim

To promote equality and diversity within Cumbria, to reduce people's experiences of discrimination, and to identify and tackle instances of exploitation within the County.

## Participation: Building Social Connections

Social capital refers to the connections between people and to the various groups, institutions and social norms that help to create, foster and regulate these connections. This can include informal social networks involving family and friends, voluntary and community organisations and more formal institutions such as workplaces, trade unions, faith groups and governmental organisations. It also includes cultural norms – shared expectations about how society works – that are often unspoken but are critical to whether people trust each other and work well together.

Key aspects of social capital for this public health strategy are as follows:

- **Building stronger communities**
- **Promoting social inclusion**
- **Building safer communities, including tackling crime and antisocial behaviour**

### Building stronger communities

Communities with strong informal networks and high levels of trust between individuals are believed to be more resilient and local people have less need to make use of formal support services because neighbours keep an eye out for each other and informal community organisations provide local social activities and services.

Cumbria is often described as having strong communities and this is reflected in the fact that areas of Cumbria frequently feature in national reports of the “best” areas to live in the UK. There are many examples of Cumbria’s communities developing their own activities and services– community transport schemes, sports clubs, library books in community pubs and good neighbour schemes – enabling individuals to connect with other people and access the services they need. Strong communities support a healthy democracy, encouraging people to take an interest in their local area and help to shape public services to meet local need.

However, even the strongest communities sometimes benefit from access to support and advice (for example, on how to access funding for community activities). Equally, areas where levels of social capital are not already high, for example where there is significant turnover of population, need additional support to develop it, often over a number of years.

Community Development staff, local infrastructure organisations and local funders all play an important background role in enabling Cumbria’s communities to organise and flourish. Communities of interest also play an important role in building social capital. People often seek support from people with similar interests (for example, through sports clubs), at a similar life stage (groups for new parents) or similar beliefs (faith groups).

Links between different communities, for example across geographies, age groups or cultural groups, help to develop understanding and build tolerance and community cohesion.

Cumbria’s new Local Industrial Strategy also recognises the role of community as vital to achieving its ambition of creating an inclusive economy. The Strategy builds upon the idea that for people to be healthy and to be successful they need to feel a part of an established and integrated community.



**Key Aim**

To support communities to thrive, with a strong and diverse informal and third sector, good levels of community participation, and a sense of having control and influence over the factors that matter most to them.

## Promoting social inclusion

Where individuals or groups find themselves isolated, whether because of factors such as geographic distance or because of things like language barriers or competing social norms, the impact on health can be significant. Loneliness has been identified as a significant public health issue, with some studies suggesting that the size of the impact could be similar to smoking 15 cigarettes a day.

Social isolation can arise out of major life changes that remove a person's access to their friends, family, communities and colleagues. This can include family breakdown, bereavement, being taken into care (as a child or later in life) or losing a job or becoming homeless. Low levels of geographic mobility in Cumbria can mean that people coming into the area may struggle to make social connections and build a friendship network, while other people who may feel they 'do not fit in' could feel particular effects of exclusion that would not be the case in more urban areas.

Structural changes to the way we live can also feed social isolation. With people more likely to live in single households or dispersed families, as well as greater online forms of interpersonal contact, it is increasingly possible for people to have few friends or people they can rely on in an emergency. This can have implications for emotional health and wellbeing, resilience in the face of adverse events and greater sense of insecurity. Digitalisation also brings other vulnerabilities such as cyber-crime, online harassment and trolling, which can particularly impact on people who are already isolated. On the other hand social media enables connections.

Certain demographic sections of the population are particularly vulnerable to isolation – LGBT people in some rural areas, women above 50 (especially where they are economically inactive, live alone, no longer have children in the household), young males with mental health conditions, care leavers, older people in single person households, BME people who have moved to Cumbria and have limited access to local groups from a similar ethnic heritage, disabled people who experience barriers to access to work, education, transport or social access, people with learning disabilities who are more likely to be single and report loneliness.

**Key Aim**

To tackle loneliness and social isolation by providing opportunities to help build social connections and engagement particularly for those identified as most vulnerable.

## Building safer communities, including tackling crime and antisocial behaviour

Feeling safe is a bedrock of good health, to the extent that the fear of crime has a bigger impact on health than the actual risk of being a victim of crime. How safe we feel at home, at work and in our neighbourhood can influence our social habits. Home (and work) is where we might spend a large amount of time so it is important to feel safe and secure there. Feeling part of the community in which we live is also just as important and can add to our feeling of stability. When we feel safe, we find it easier to relax and do all the things that comfort us. If we are feeling unsafe then we may also feel anxious, depressed or frightened, which can have a direct impact on our health. It can also have

an indirect impact whereby we change our behaviour because we are concerned for our safety. This shows that feeling safe is of paramount importance to our wellbeing and our health.

Cumbria remains one of the safest places to live in England and Wales and feelings of safety are generally high. Cumbria Constabulary is recognised by Her Majesty's Inspector of Constabulary and Fire & Rescue Services (HMICFRS) as a good performing force and for keeping people safe.

However, Cumbria is witnessing an increase in levels of organised crime and the misery this brings on communities through drugs, violence and the exploitation of the vulnerable. In addition, rural isolation presents challenges in identifying vulnerable victims of domestic and sexual abuse. Technology is also changing how the public interacts with the world and each other, changing culture and expectations and criminal use of the internet.

The development of local community based hubs brings together several partner organisations, including the police and District Councils, to combine resources and expertise, to strengthen capacity and build a strong, secure, effective infrastructure to deal with community problems at a local level, increasing public confidence and feelings of safety.

**Key Aim**

To reduce crime and antisocial behaviour and to ensure that people in Cumbria retain low levels of fear of crime across the whole County.

## Place: Improving physical assets

It is important that we develop our physical assets (houses, buildings, transport ) in a way that is sustainable, minimising the use of natural resources and maximising the use of human skills and ingenuity. The key assets of place for this strategy are as follows:

- **Promoting healthy town and country planning**
- **Developing a sustainable transport system**
- **Ensuring high quality and safe housing**
- **Access to healthy food**

### Promoting healthy town and country planning

The planning system has a very significant impact on the built environment in which people live and work. It can play an important role in facilitating social interaction and creating healthy, inclusive communities. Planning functions are an important lever to shape the natural and built environment, which can contribute to positive health outcomes through green spaces, housing, transport and our high streets and town centres – not forgetting public health protection – air, noise and light pollution. Promoting healthy and safe communities is a requirement of the revised National Planning Policy Framework (NPPF) which further states that planning policies and decisions should aim to achieve “*healthy, inclusive and safe places*”. It is therefore critical that the planning system is active in working towards improving health and wellbeing as a key priority.

In Cumbria, the six District Councils and the National Parks are the main planning authorities, with the County Council being the lead for infrastructure planning, highways, minerals and waste and flood and development management. Partnership working across tiers and organisations is therefore key to influencing and designing healthy infrastructure.

With multiple planning authorities in Cumbria, inevitably there are several different approaches to building health into planning objectives. As part of the World Health Organization Healthy Cities Network, Carlisle has included health as an explicit feature within their adopted local plan via a strategic policy on ‘Healthy and thriving communities’. Other Districts have adopted specific policies with positive health benefits via environmental or housing policy. The opportunity exists to take a joint approach to maximising the health benefits of the planning system.

#### Key Aim

To ensure that planning authorities across Cumbria develop and implement policy in support of this strategy, including focusing on active transport, green space, quality housing, availability of healthy food, carbon reduction and creation of employment opportunities.

### Developing a sustainable travel and transport system

The transport system is critical to enabling people to access goods and services that are important for health and wellbeing, to encouraging physical activity through promoting regular walking or cycling and to tackling climate change and improving air quality.

Cumbria is a large rural county with many settlements that are not large enough to sustain a wide variety of services. Many people therefore have to travel significant distances to access services. For those with a car this may not prove too problematic. At the time of the 2011 Census, 21.4% of

households in Cumbria did not have access to a car, a lower rate than the average for England (25.8%). However those without access to a car (particularly the young, the old and those who cannot afford one) and who therefore rely on public transport, can face significant challenges.

The Local Industrial Strategy highlights the impacts of Cumbria's aging public transport which is insufficient to meet the population's needs. Poor rail connections, particularly from coastal towns and a reduction in bus services, particularly in rural areas can lead to social isolation and worklessness.

Communities risk isolation if they do not have passenger transport that is:

**Available:** the passenger transport network should be within easy reach of where people live and take them to and from the places they want to go at times and frequencies that correspond to patterns of social and working life. People also need to be kept informed of the services that are available;

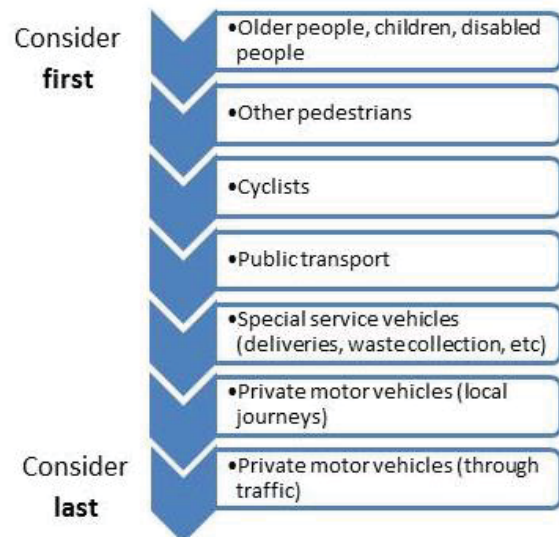
**Accessible:** vehicles, stops and interchanges (and the walking routes to and from these) must be designed in such a way that, as far as possible, anyone can use them without difficulty;

**Affordable:** people should not be 'priced out' of using passenger transport because of high fares and should be able to easily find the right ticket for them;

**Acceptable:** people should feel that passenger transport is something that is equipped to meet their needs as well as comfortable, safe and convenient.

The physical transport infrastructure in Cumbria (in common with the rest of the country) remains very focused on cars, at the expense of more active forms of transport such as walking and cycling.

To promote health and a more sustainable environment, the well-known road user hierarchy (right) needs to move from rhetoric to reality. In addition, there is a need to encourage a greater uptake of new electric and other alternative fuel vehicles in order to reduce transport emissions, improving air quality and helping to tackle climate change.



#### Key Aim

To develop the physical transport infrastructure to make it low carbon and more active, including making Cumbria a great place to walk, cycle, and use electric vehicles, and to ensure that the public transport system in Cumbria provides a viable alternative to car ownership, particularly for the most rural communities.

## Ensuring high quality and safe housing

In Cumbria the median house price is just under £145,000, well below the national average of £186,000. However, in certain parts of the County, such as the Lake District, prices far exceed the national average and affordability is a major problem – house prices can be more than ten times local incomes. However, the County also contains large areas (mainly urban) of deprivation. In response

there has been significant activity around housing to ensure that all people have access to affordable, safe and modern standard of housing which supports a healthy lifestyle. The local industrial strategy reports that in all six districts house building is above Cumbria's required level.

The Cumbria Housing Group has identified three priorities for improved housing across Cumbria:

**Priority 1 - Housing Growth, Affordability and Community Sustainability.** Housing is a cornerstone of Cumbria's economic ambitions. Investment and growth will bring many more people into the County and this means that affordable housing, including in the social rental sector, is needed for employees and to enable young people to take up jobs locally. It also means that high quality market housing is needed to attract skilled people to come and work in Cumbria, generating wealth and spending to sustain and develop our local services and town centres.

**Priority 2 - Housing Regeneration:** Regenerating our poorest housing and town centres will improve the quality of housing and increase choice and demand in these areas. We want to bring empty homes back into beneficial use, improve the energy efficiency of homes and improve standards in the private rental market. We also want mechanisms established to ensure that second homes/holiday homes do not dominate local housing markets to help sustain our communities, particularly in rural areas.

**Priority 3 - Supporting Independent Living.** Poor quality neighbourhoods and housing conditions and at its extreme, homelessness, can contribute to a range of health conditions. These all have a long-term impact on particularly vulnerable people, with consequential impacts for acute hospital services, adult social care and children and young people's life chances and employment prospects because of the effect on learning and education. It is therefore crucial to deliver better-designed housing that can be easily adapted to meet the life changes of occupiers to enable them to live independently.

#### Key Aim

To improve the housing stock across Cumbria, ensuring that everyone has access to safe, warm, affordable housing, and that new housing supports wider aims including carbon reduction, climate change resilience, energy security, and adaptability.

## Access to healthy food

The food system is a vast and complex global infrastructure and the choices that people make are heavily influenced by availability, price, advertising and many other factors besides taste preference. One in four children starting school in Cumbria are not a healthy weight. However, more children from deprived areas are overweight or obese and the differences between low income and high income areas is growing every year.

Dietary habits are changing across Cumbria, mirroring national and global trends. Many households have two working parents and due to time pressure, stress, lack of control over working times and greater availability and affordability of fast food, children are eating less home cooked food. Meals eaten outside the home tend to be associated with higher intake of sugar, salt, fat and salt and portion size tends to be bigger.

Ensuring good access to healthy food, healthy food production locally, supported by a range of community food activities is vital in creating healthy places. Several parts of Cumbria are advancing

work around the food agenda through healthy options awards, allotments and community food projects.

Exposure to marketing of high fat, high sugar processed food influences children's preferences and eating habits. Children who engage with food brands online are more likely to consume unhealthy food. Children and young people that have more screen time, are more likely to be exposed to food advertising through you tube adds, vlogs and online games.

**Key Aim**

To promote a vibrant and diverse food economy, with local communities having access to a range of healthy and affordable food options, and to reduce waste and the ecological footprint of the local food system.



## Prosperity: Fair and inclusive growth of our financial assets

Financial growth and the distribution of financial assets is most commonly considered and pursued as a goal of social and economic policy. There is a strong association between wealth and health, with more affluent people experiencing greater control over their life, greater life opportunities, less exposure to health damaging environments and greater healthy life expectancy. Societies with a large difference in wealth between communities have poorer health overall. Therefore reducing wealth inequalities improves the health of all members of society. For the purposes of this public health strategy, the key aspects of financial capital are as follows:

- **Reducing income inequalities**
- **Promoting sustainable economic development**

### Reducing income inequalities

Because wealth and health are so inexorably linked, tackling health inequalities is dependent on reducing income inequalities. For Cumbria, the focus is on lifting incomes at the bottom of the income scale – ‘levelling up’ – rather than by redistribution from the most affluent, which is mostly outside the powers of Cumbrian agencies.

Results can be achieved through a two-pronged approach. The first is to alleviate short term issues causing poverty and the second is to focus on the longer term issues that restrict life chances.

Some of challenges around alleviation are linked to low income households. These include changes to benefits, stagnant wages, a culture of low aspiration and a lack of joined up advice services which are easily accessible. There are also challenges around consumer culture and society’s need for new and more expensive, fashionable products that put more pressure on incomes. In rural areas, there are additional costs relating to transportation and fuel poverty, which eat into household budgets. It is therefore important that public services working with people on low incomes offer advice and support on financial management.

In the longer term, it is crucial that the education, skills and employment agenda is focused on supporting people from low income households. This includes provision of high quality child care in areas of multiple deprivation, reducing the disadvantage gap for pre-school and at key stages up to GCSE, increasing the number of people from low income backgrounds into further and higher education and increasing opportunities for people from low income backgrounds to benefit from the wide range of training available.

The role of the skills system is also vital in addressing the skills gap for people of working age and in terms of providing opportunities for older people who wish to stay economically active.

#### **Key Aim**

To reduce levels of poverty and income insecurity through support to vulnerable groups and a focus on supporting people into high quality employment.

### Promoting sustainable economic development

When it has the right focus, economic development can be the key to unlocking several of the other themes of this strategy and can bring significant public health improvements. Good economic

development will focus on benefiting existing residents, particularly those with low quality and/or low paid jobs, through creation of jobs matched to local skills and through up-skilling local residents to take on the available jobs. Economic development that seeks mainly to attract existing affluent populations to move into the County may boost economic statistics, but it will do so alongside widening inequalities within the County.

In Cumbria, the main focus for sustainable economic development is the Local Industrial Strategy. This is built on two key platforms:

- Inclusive Growth: Prosperity for All
- Productivity: Improving all sectors and reducing West/East disparities.

However, Cumbria faces a number of challenges in achieving these goals. Productivity in Cumbria is below average across most sectors. As described in the chapter on skills, we have a small pool of residents with graduate level qualifications and a high proportion of people with no qualifications. Crucially, we have a declining working age population, with a net outward migration of 18-24 year olds.

**Our five foundations align to our vision for a transformed economy**



**Key Aim**

To ensure that economic development supports health and wellbeing and tackles inequalities by focusing opportunities on the most disadvantaged parts of Cumbria.

## Key Measures of Progress

*[DN – still being developed, further work required]*

### Planet

Theme	Indicator	Geographic coverage	Source	Further information	Baseline	England/ comparator
<b>Green Space</b>	Utilisation of outdoor space for exercise/health reasons	County	PHOF	Indicator 1.16 Mar 2015 – Feb 2016	15.8%	17.9%
<b>Biodiversity</b>						
<b>Climate Change</b>	Net Carbon emissions			New indicator to be developed	Baseline to be established	
<b>Air Quality</b>	Combined Air Quality Index	LSOA	IMD	Living Environment domain: Air Quality Indicator. NOT REGULARLY UPDATED.	n/a	n/a
	Air pollution: fine particulate matter	District/County	PHOF	Annual 2016	5.8 mean µg/m3	9.3 mean µg/m3
<b>Waste</b>						

### People

Theme	Indicator	Geographic coverage	Source	Further information	Baseline	England/ comparator
<b>Education, skills &amp; lifelong learning</b>	An increase in the proportion of people in Cumbria aged 16-64 years with skill level 2 or above (CPDP measure M3.3)	County/district	Annual Population Survey	Annual Jan '17 – Dec '17	75%	

	An increase in Apprenticeship starts delivered in Cumbria (CPDP measure M3.4)	County	CCC	Annual – academic year	TBC	
<b>Meaningful Occupations</b>	An increase in the employment rate of 16-64 year olds (CPDP measure M3.1)	County/district	Annual Population Survey	Annual Jan '17 – Dec '17	78.1%	
	The proportion of 16-17 year olds Not in Employment, Education and Training to be 3.75% or lower for 2018/19 (CPDP measure M2.6)	County/district	Inspira	Quarterly March 2018	3.8%	5.6%
	% of people who are on permanent contracts (or on temporary contracts and not seeking permanent employment), who earn more than 2/3 of the UK median wage, and are not overworked (i.e. <49 hours a week), or underworked (unwillingly working part-time)	County	Labour Force Survey/Thriving Places Index			
<b>Access to Leisure</b>						
<b>Arts and Culture</b>						
<b>Discrimination and Exploitation</b>	<i>Hate crime statistics available from Cumbria Constabulary (Crime &amp; Community Safety Strategic Assessment). Annual.</i>					

## Participation

Theme	Indicator	Geographic coverage	Source	Further information	Baseline	England/ comparator
<b>Stronger communities</b>	Indices of Deprivation – overall deprivation	LSOA	IMD	NOT REGULARLY UPDATED	n/a	n/a

<b>Social inclusion</b>	Social isolation: proportion of Adult Social Care users who have as much social contact as they would like	County	PHOF/Adult Social Care Survey	Annual 2017/18	51.4%	46.0%
	Barriers to Housing and Services/Geographical Barriers to Services	LSOA	IMD	NOT REGULARLY UPDATED	n/a	n/a
<b>Safer Communities</b>	Levels of crime (Total Crime)	County/district	CCC/Cumbria Constabulary	Annual 2016/17	25,428 51.1 per 1,000	74.6 per 1,000
	Levels of Anti-Social Behaviour	County/district	CCC/Cumbria Constabulary	Annual 2016/17	12,291 24.7 per 1,000	
	How safe do people feel? (check if still available)	County	Cumbria Constabulary	Annual?	TBC	TBC

## Place

Theme	Indicator	Geographic coverage	Source	Further information	Baseline	England/comparator
<b>Healthy Planning</b>						
<b>Sustainable Transport System</b>	Journey Time statistics: access to services – public transport/walking	County/district	DfT	2014	24 minutes	17 minutes
	Journey Time statistics: access to services – cycling	County/district	DfT	2014	19 minutes	14 minutes
	Percentage of adults walking for travel at least 3 days per week	County	Active Lives Survey/ Sport England	Annual 2016/17	18.1%	22.9%
	Percentage of adults cycling for travel at least 3 days per week	County	Active Lives Survey/ Sport England	Annual 2016/17	2.4%	3.3%

	% of CCC maintained road incorporating cycle lanes	CCC			
<b>High quality and safe housing</b>	Proportion of social and private housing in poor condition (Living Environment domain: housing in poor condition; houses without central heating)	IMD	NOT regularly updated	n/a	n/a
	Affordability of home ownership (Housing affordability)	PHOF (Paycheck)	Annual 2017	5.5 ratio	7.9 ratio
	% Households in Fuel Poverty	LSOA	Gov.uk/DBEIS	Annual 2016	12.2%
	Homelessness - eligible	County/district	Ministry of Housing, Communities & Local Government	Quarterly – Jan-Mar 18	44
<b>Access to healthy food</b>	Healthy Foods – Density of fast food outlets	District	PHE	Annual (not sure when it will be refreshed/updated)	Allerdale, 98 outlets (100.9 per 100,000 population) Barrow-in-Furness, 84 (124.4 per 100,000) Carlisle, 105 (96.9 per 100,000) Copeland, 69 (99.6 per 100,000) Eden, 51 (96.9 per 100,000)



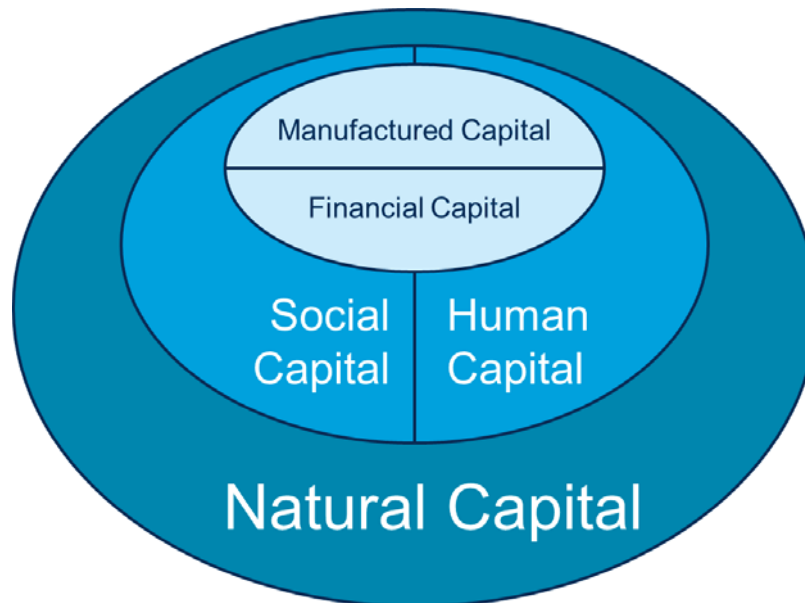
	South Lakeland, 111 (106.9 per 100,000)
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## Prosperity

Theme	Indicator	Geographic coverage	Source	Further information	Baseline	England/ comparator
<b>Fair and inclusive growth</b>	Workless households (part of "Inclusive growth" indicators in LIS)	County/district	Office for National Statistics		25,000 (15.3%)	England 14.0%
<b>Reducing income inequalities</b>	% low income households	Cumbria/ district/ LSOA	CACI/CCC	Annual 2018	11.9%	9.6%
	A reduction in the claimant count rate (CPDP measure M3.2)	County/district	ONS/CCC	Monthly/Annual September 2018	1.9%	2.2%
	Key Stage 4 (GCSE) Attainment, Grades 4-9 - Disadvantaged	County	DfE/CCC	Annual 2018 academic year	40.7% (provisional)	44.4%
	Key Stage 4 (GCSE) Attainment, Grades 4-9 – Disadvantage Gap (All pupils Cumbria/national non-disadvantaged difference)	County	DfE/CCC	Annual 2018 academic year	-31.2% (provisional)	
	Outcomes for SEND (school support pupils) at Key Stage 2 achieving the expected standard in Reading, Writing and Mathematics to improve from 17.9% to be in line with national level (CPDP M2.5)	County/district	CCC	Annual 2018 academic year	22.6% (provisional)	23.8%

## Appendix 1: The Five Capitals Model

This strategy is built around the “five capitals” model proposed by Forum for the Future as a framework for sustainable systems. Broadly speaking this starts from a recognition that society is a sub-system of the broader ecosystem, and that the economy is a sub-system of society. At each of these levels there are different assets, collectively referred to as “capital”, that can be exploited and/or developed.



**Natural capital**, sometimes also referred to as environmental or ecological capital, is made up of all those natural resources and processes that people depend on. This includes obvious natural resources such as land, water, air, timber, and animals, but also natural processes such as the water cycle and climate regulation, sometimes referred to as “ecosystem services”. Natural capital is the basis of all other capitals. It can be utilised to support the development of other capitals – for example building things essentially turns natural capital into manufactured capital and financial capital – but it has to be utilised sustainably in order to ensure that people can have a good quality of life today, and to avoid damaging the prospects of future generations.

Most obviously, **human capital** encompasses people’s skills, knowledge and experience, the things they draw on every day in living and contributing to society. Less obviously it also includes people’s motivations, their capacity for things like empathy, passion and joy, and also their intellectual output such as art and other cultural expressions.

**Social capital** refers to the connections between people, and to the various groups, institutions and social norms that help to create, foster and regulate these connections. This can include informal social networks involving family and friends, voluntary and community organisations, and more formal institutions such as workplaces, trade unions, faith groups and governmental organisations. It also includes cultural norms – shared expectations about how society works – that are often unspoken but are critical to whether people trust each other and work well together.

The concept of **manufactured capital** is a broad one, encompassing for the purposes of this strategy any material goods or infrastructure that have an impact on people's quality of life. Because of both its reliance and its impact on natural capital, it is critical that growing and improving manufactured capital is done in a way that is sustainable, minimising the use of natural resources and maximising the use of human skills and ingenuity.

**Financial capital** is essentially the amount of money available within the local economy, and is the form of capital most commonly considered and pursued as a goal of social and economic policy. At one level it is clearly critical for public health: within the normal range of experience, more affluent people are generally also more healthy, across almost all measures of health. However at a broader level financial capital has no intrinsic value: it plays an important role in enabling other forms of capital to be owned and traded, but it is only representative of these other forms of capital. Because of this, financial capital cannot grow sustainably without growth in the other forms of capital as well.

Interpreted for the purposes of a public health strategy, this model suggests that a community is healthy and sustainable when there is an appropriate stock of all five capitals. A key feature of this model is that it emphasises the importance of building all five capitals without degrading any of them. It sets a positive vision of building a better society in which everyone is able to maximise their potential for health and wellbeing.



## Carlisle Partnership Executive

### Excerpt from Minutes of the Carlisle Partnership Executive meeting 3 December 2018 Committee Room Flensburg, Civic Centre, Carlisle

#### Item 4 TOPIC THEME: Health and Wellbeing

##### Cumbria Public Health Strategy

The Chair welcomed Colin Cox and invited him to speak on the Cumbria Health and Wellbeing Strategy

The Health and Wellbeing Strategy is a statutory document and the current one runs out at the end of 2018 and they are moving away from the very lengthy document to a high-level 10-year document with themes we can work to, to encourage discussions regarding priorities.

The vision is “*To enable Cumbrian Communities to be healthy and to tackle health inequalities*”. The 4 themes are:

- Protecting the health of the population as a whole using screening etc.;
- Providing high quality person-centred care;
- Tackling the wider determinants of health and wellbeing
- Improving health and wellbeing throughout the life course

The strategy as it is means each of the 4 headings gets another 1-2 sides to set out priorities etc. Delivery will be set through other documents, e.g. the Public Health Strategy.

##### The Draft Joint Cumbria Public Health Strategy

Is focussed on the wider determinants but with more information and detail emerging through other plans and the pentagon in the centre sets out what we are trying to achieve. This high-level document tries to align the 6Ps for a Healthy City and was adopted from 5 capitals in trying to recognise that the whole environmental ecosystem is the basis for all that happens in society. The document talks about assets rather than capital and covers 4 headings and within each there will be a single key aim for each area. Chapters are edited to further develop the Strategy. This has been pulled together with input from many partners across the county – including the districts – CC thanked ED for her input into the development. It is inevitable that to get something that is acceptable to all it becomes a document with high level aims but the important thing is that it gives a framework for local action. It is hoped it will be adopted by Cumbria County Council, the 6 District Councils and the National Park Authority as a way of planning future actions with a consistent approach while being relevant to the Authority's local area. This document can still be tweaked; is it going in the right direction?

- Emma added that within the document there will be something relevant to each member of the Partnership and following the conversation at this meeting, information would be pulled together.
- Grant Glendinning said he liked the inclusion of skills and life-long learning but the opportunity to strengthen the working age of the population was becoming more prevalent with jobs in the high skills sector. Colin said if that was not coming through strongly enough they would look at it. Cumbria is unusual in that it has more jobs than people but they needed the skills to match the jobs.
- Cathryn Beckett commented on youth participation and was pleased to see its inclusion and said to let them know how they could help to work with it and whether data they generate is useful.
- Colin said getting participation over the next 10 years was important.
- Lee Sherriff was it would be helpful in developing the Healthy City Action Plan at a local level.
- Darren Crossley said our potential to influence, to set out criteria for us to work to open the door to how we would like to work. It should include health planning in all CCC work and Carlisle feels more than happy to have that conversation and make more detailed plans, get the terminology right etc. This was highlighted at a future Healthy City meeting.
- Jane Meek said the Garden Village would have an important part to play in health for the next 20 – 30 years and they were keen to understand about developing communities rather than just houses, e.g. taking mental health and wellbeing into account as an important part of planning for the future.
- Colin said the text of the document tried to set out why it's important for mental health.

- Jane said we need to get the correct balance between the number of people in the city and the skills range; Carlisle is now almost at full employment, so we need to attract new people to the city and a good health strategy is important for the economy and to help people work longer. Jane said we can have a strategy, but actions are very important.
- Colin said they were trying to ensure the health and economy improvement strategies went hand-in-hand. Emma also explained that the LEP has been involved with the development of the economy chapter.
- Emma said it was great to see the food agenda included and she would take it back to the food partnership.
- Colin said this was a significant area in the work and we are looking to further increase the food / healthy weight agenda. It is a jointly-owned strategy that came from the health and wellbeing strategy and they wanted to broaden it. Other strands supported this, e.g. obesity issues and the new takeaway food premises planned for the city, and planning policy can help.
- The Chair said it was important for the third sector and communities to be involved and take control of some aspects of the plan and was pleased to see the community focus.
- Darren said, regarding takeaways, we have a duty to define the difference between a “nanny state” and the right of the individual to make their own decisions but we could influence the proliferation of this type of establishments and have the opportunity and duty to do so.
- Jane said there are tools available that could restrict fast food takeaways and she will advise CCC on that basis.

**Action: - PA.** Paul Armstrong said he would share the University’s “Charter for Health” document which they use when training the next generation of health worker. He also stated he would share this with the new Pro-vice Chancellor whose remit is Health.

**Action: - ALL** - The Chair asked members to look at the document from their area of expertise and feed comments back to Colin and Emma by the end of January if possible.

**Action: - ED** to collate any feedback.

#### Healthier and Happier Cities for all (6Ps)

The Chair invited Darren Crossley to speak on the WHO Healthy City 6Ps.

- Gave an update on Healthy City and WHO
- Carlisle healthy city designation is coming to the end of its term and a future submission and application will be to be completed; do we subscribe to future WHO plans?
- In Denmark earlier in 2018, the city leaders from across Europe (including Russia) produced a consensus in 15-20 pages which captures in more detail our duty and spells out what we all should be thinking about in relation to healthy cities.
- We are beginning to subscribe to this model, increasingly around planning with a sustainable agenda and are trying to put sense to each “P” in Carlisle. It has not yet been applied to Borderlands but it can be.
- Our timetable is not entirely clear yet, but we do need to develop our own agenda. It has been a very busy year regarding health and wellbeing, with the sugar smart campaign, garden village, policy development, food and healthy city. For example, in terms of the Sands Centre development it is about the wider definition of health, i.e. physical health, a safe environment, access to goods and services, access to employment, participation and engagement and a healthy lifestyle and behaviour.
- There are opportunities for the Healthy City initiative to influence upstream intervention to reduce pressure on the system and regenerate pride of place. This is all wider than most would consider health to cover.
- We need to get down to practical action within the available resources and the Carlisle Healthy City approach will do its best to work with other strategies. The elections in May 2019 will affect the timescales for this but we will keep working towards it. We need to get more people to think in this way of social intervention and Ambassadors in Business will be very important – healthy workplaces - settings. Darren hopes to have more detail for another session.
- All were supportive of the partnership approach and benefits – increasingly becoming an agenda relevant to all.
- **Action: ALL:** Emma said she would appreciate the support of attendees in letters of support for the application and actions to take back to the Healthy City Forum.
- Emma stated prevention was becoming a greater focus.

- A number of key documents were highlighted **Action: - Emma will put links in the minutes:**
  - The government has a new vision from November 2018 – Matt Hancock, “Prevention is better than Cure”, which relates to life expectancy etc.  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/753688/Prevention\\_is\\_better\\_than\\_cure\\_5-11.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/753688/Prevention_is_better_than_cure_5-11.pdf)
  - A vision for population health (Kings Fund) Population Health.  
<https://www.kingsfund.org.uk/sites/default/files/2018-11/A%20vision%20for%20pop%20health%20summary%20online%20version.pdf>
- Steve Morton said the role of the “Prevention is better than Cure” strategy is to ensure that prevention comes in at the correct level, e.g. fast food takeaways, places for children to play etc. There was a further discussion around Place and the Place Standard session – later on the agenda.
- Darren said there seemed to be more positive engagement of all the health providers recently with more space for discussion and more funding for prevention as well as treatment.
- Steve said they were working on a web-based App for family healthy weight management
- Colin Cox endorsed the documents and was keen to see these used / implement locally.
- Agenda to be brought back at a future meetings as things develop.