



# CHELMSFORD

# Health & Wellbeing Plan

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*Healthy communities are defined by much more than our actions or access to traditional healthcare; green spaces, social activities, education, and employment opportunities, healthy food, suitable housing, and transport all play a hugely important role. To prevent illness and improve the health and wellbeing of local communities, we need to consider all these aspects and more. This is called a population health approach. This isn't easy but by strengthening partnerships across communities, businesses, local government, and the NHS we can make a difference.*

The Kingsfund vision for population health

The World Health Organisation defines public health as “the art and science of preventing disease, prolonging life, and promoting health through the organised efforts of society.”

The Chelmsford Health and Wellbeing Plan has been developed in partnership with members of Livewell Chelmsford, our local multi-agency health and wellbeing group supporting the Wider Essex Joint Health and Wellbeing Strategy. Livewell Chelmsford aims to promote, facilitate, and encourage members to work collaboratively to improve the health, wellbeing, and quality of life of everyone in Chelmsford.

The following organisations are represented on Livewell Chelmsford:



# 1 Summary

The plan sets out how our key functions as a district council influence health and wellbeing and sets a direction for the council and partners to address an agreed set of health and wellbeing priorities to lead and improve health and wellbeing for all.

The following diagram presents our health and wellbeing priorities set out within the strategy.





# Overview of Chelmsford's Health and Wellbeing

## BIRTH

### SMOKING IN PREGNANCY

In 2017/18 170 babies were born to mothers that smoke. 7.8% of mothers smoke at the time of delivery compared to 10.8% nationally

### BREASTFEEDING

77.6% mothers initiate breast feeding within 48 hours of delivery compared to the national average of 74.5%

### CHILDHOOD OBESITY

15.4% children aged 10-11 are obese compared to the national average of 20.1%

### CHILD INJURIES

313 hospital admissions for unintentional and deliberate injuries, a rate of 99.1 per 10,000 for 0-14-year olds compared to 96.4 nationally

### GCSE RESULTS

65.8% children achieved 5A\*-C including Maths and English compared to the national average of 57.8%

### TEENAGE CONCEPTION

The rate of teenage conceptions is 12.2 per 1,000 which is lower than the national average of 18.8%

### DIET

It is estimated 53.7% of adults meet the recommended '5 a-day' compared to the national average of 57.4%

### ALCOHOL

573 per 100,000 persons admitted to hospital due to alcohol-related conditions compared to 632 nationally

### PHYSICAL ACTIVITY

Locally, 67.9% adults are physically active meeting the CMO recommendations. Nationally, this is 66.0%.

### DEATHS FROM CANCER

Rates of deaths from all cancers in people under 75 were 119.8 per 100,000, significantly better than the national average of 134.6

### EARLY DEATHS

273 per 100,000 early deaths (under 75 yrs.) significantly better than the national average of 332.

### SMOKING

12.0% of adults are current smokers, compared to the national average of 14.9 %

### UNEMPLOYMENT

3.2% of the population aged 16+ are unemployed compared to 4.4% nationally. 1.6 per 1000 of the population aged 16-64 yrs. are long term claimants of jobseeker's allowance compared to 3.5 nationally

### HEALTH INEQUALITIES AND DEPRIVATION

Life expectancy is 6.2 years lower for men and 4.3 years lower for women in the most deprived areas of Chelmsford than in the least deprived areas. In 2016, it was recorded that there are 11.8% (3,550) children living in low income families.

### DEPRESSION

9.9% of people completing GP patient survey reported having depression or anxiety compared to national average of 13.7%. The estimated prevalence of depression for all ages is 14.1% compared to 15.0% nationally.

## END OF LIFE

### LONG TERM CONDITIONS

14.4% of population reported they have a health problem or disability that limits their day to day activities and has lasted, or is expected to last, at least 12 months. Nationally this is 17.6%

### DEMENTIA

In 2017/18 2,928 people aged 65 and over are registered as having dementia on their practice register in Mid Essex

### FALLS

Emergency hospital admissions due to falls in people aged 65 and over is 1,930 per 100,000 compared to 2,170 nationally

## 2 Introduction

### 2.1 What is the Health and Wellbeing Plan?

The Health and Wellbeing Plan is our strategy for improving the health and wellbeing of people in Chelmsford and reducing health inequalities. The Plan identifies population needs, key priorities, and actions we will take to address them as part of a wide system of partners.

A wide range of factors beyond our physical health and mental wellbeing influence our health and wellbeing; issues such as unemployment, poor housing, and feeling unsafe can all impact mental and physical health. These are often called the wider determinants of health. Consequently, our social networks, local economy, and natural environments play a crucial role in influencing our health and wellbeing.

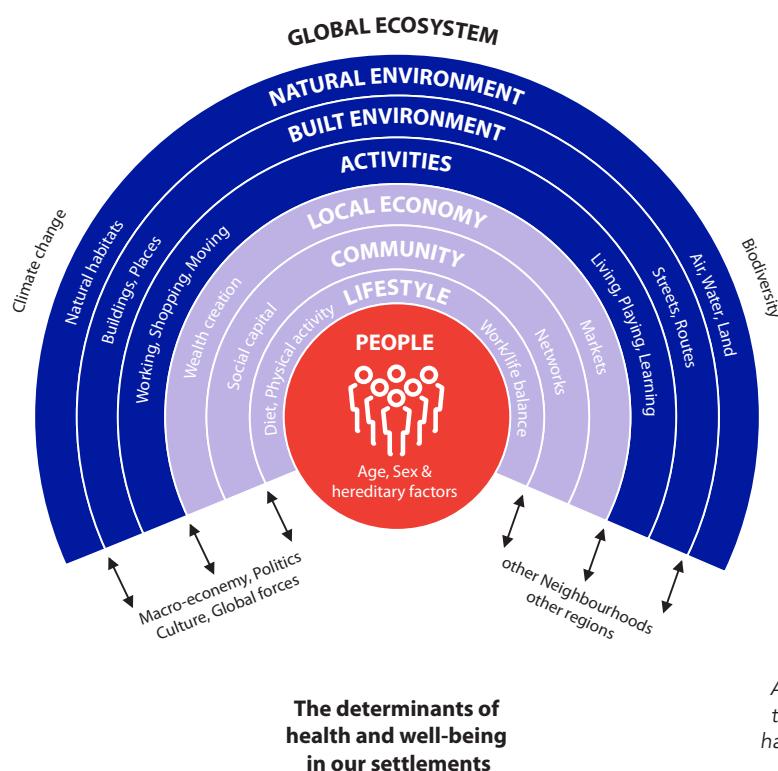


Figure 1:  
A health map of  
the local human  
habitat, Barton &  
Grant (2006)

The purpose of our Plan is to express our shared set of aspirations and to provide a focus for collective action on the most important health and wellbeing issues facing the residents of Chelmsford. This Plan aims to support Chelmsford City Council, Essex County Council, the Mid Essex Clinical Commissioning Group (CCG), Active Essex, the Chelmsford Cultural Development Trust (CCDT), Voluntary sector organisations and other partners to combine resources and skills to help improve the health of those people who live, and work in Chelmsford.

It is only through collaborative and partnership working that Chelmsford City Council and others can support and empower individuals throughout their life to maximise their potential for a healthy life. The Plan also aims to encourage and enable people to do more for themselves in maintaining and improving their health and wellbeing.



## 3 Our vision

**“Our vision is to work with communities and residents to reduce health inequalities and improve the opportunities for adults and children so that they can enjoy a healthy, safe, and fulfilling life.”**

By joining the World Health Organisation (WHO) Healthy Cities Network, we have demonstrated that we are committed to embedding health and health equity in all local policies. Furthermore, by working with other organisations, we form part of a strong collective voice for public health and sustainable development.

We want the district covered by Chelmsford City Council to be a place where:

- the physical environment in which our residents live will improve their health and wellbeing
- children grow up to reach their full potential and are happy
- older people feel valued and supported in their local communities
- people have access to good employment and work opportunities
- people stay healthy and enjoy life and have the resilience to cope with life's changes
- people can expect to enjoy good health, whatever their social or economic circumstances
- people are connected to their communities and to each other

## 4 Our overarching principles

A set of principles have been identified to enable and set the foundation for decision making and evaluating actions against our identified health and wellbeing priorities. It is important to ensure we work towards contributing to and facilitating a sustainable health system through shifting focus from health-related work and care to prevention, early intervention, and resilience.

### 1. Partnership working

A commitment to a holistic and partnership approach to improving health and wellbeing in the district, enabling statutory and voluntary sector organisations to work collaboratively with communities and build on existing assets (ABCD approach).

### 2. A focus on prevention of ill health and early intervention

Prevent and tackle the wider causes of ill-health, poor life choices, and health conditions.

### 3. Increase communication and making use of technology

On-going and effective communication, co-production, and engagement with residents and partners about health issues. We will raise awareness of local activities and events by using the “livewell” platform for information and guidance to help communicate health and wellbeing messages.

### 4. Improve mental health and wellbeing

To improve mental health and wellbeing, ensuring mental health is regarded across all streams of work. Ensure that the promotion of health and wellbeing features in all strategies and plan where possible.

### 5. Effective health service and self-care

Contribute to achieving effective health services and promoting self-care by utilising and promoting the Connect Well self-care, self-refer platform.

## 5 National and local connections of health and wellbeing



Figure 2.  
Mid Essex CCG Livewell  
Wheel: supporting people  
to livewell from wider  
determinants of health to  
prevention, treatment and  
promoting self-care and self-  
management

### 5.1 National Context

The Marmot Review 2010: Fair Society, Healthy Lives, emphasised the scale of health inequalities in England and proposed practical, evidence-based actions to reduce health inequalities. The report highlighted the need to take action across the wider determinants of health and called for progress to be made on a clear set of policy objectives. This report had a significant impact on public health services in England, guided government policy, and has given a significant rise to the commitment of reducing health inequalities and addressing social inequalities.

The Government's White Paper 'Healthy Lives, Healthy People- A Strategy for Public Health England' (2010) responded to the Marmot Review and adopted the life course framework for tackling the wider determinants of health and placed local government and local communities at the heart of improving health and wellbeing for their local areas. This approach was established through the Health and Social Care Act 2012, where Public Health England was established as a national executive agency of the Department of Health. At the local level, public health became a statutory duty for local authority Public Health teams. The changes in national policy have provided closer working between health organisations and local authorities.



## 5.2 Essex Context

Figure 2 shows that many connections support health in the system from wider determinants of health to prevention, treatment, and promoting self-care and self-management.

Chelmsford City Council works closely with key public health partners to focus on and target similar priority areas. This provides the opportunity for increased discussion and input into decisions that seek to maximise whole-system preventative approaches.

Our strategy supportively links to the Essex Joint Health and Wellbeing Strategy (EJHWS), which sets out priorities identified through the Joint Strategic Needs Assessment (JSNA). The City Council and other key stakeholders had the opportunity to contribute to the strategy to ensure a greater focus on local need.

Chelmsford sits within the Mid Essex Clinical Commissioning Group (CCG) footprint, which is responsible for planning and buying healthcare services for Mid Essex. These services include hospital care, medicines and prescribing, mental health, urgent care, community care, and ambulance services. Chelmsford is also geographically located within the Mid and South Essex Sustainable Transformation Partnership (STP).

Active Essex is a key member of our local Health and Wellbeing board whose aim is to make sport and physical activity accessible to all Essex residents. Active Chelmsford is our local active network working to deliver projects in our district that aim to make the inactive to become more active.



## 5.3 Local Picture

In Chelmsford, whilst the majority of our residents lead healthy, active, and prosperous lives, we continue to have pockets of isolated health and social problems. The local profile of the JSNA continues to flag that Chelmsford needs to reduce the gap between the more affluent and deprived communities. Areas of focus include:

- Tackling health behaviours due to increasing excess weight in adults and children, levels of smoking and alcohol and substance misuse (gangs, antisocial behaviour).
- Helping people to age well due to increasing issues related to an ageing demographic, including high levels of hip fractures and people living with dementia.
- Reducing high levels of excess winter deaths made worse by winter pressures and fuel poverty.

Our aim is to mitigate such factors, as well as encourage and empower people to take a more active role in their own and other's physical and mental health. We will do this by collaborating and working with partners to deliver targeted interventions within areas of need, as well as supporting self-care through helping people to find local, existing services that are appropriate and helpful.

We will work closely with Essex County Council's Public Health team, Mid Essex Clinical Commissioning Group and with internal District Council teams such as Community Safety, Planning Policy, Economic Development, Community Sport and Wellbeing development, and Parks and Green Spaces, the Arts and Culture services, Voluntary Sector and other external partners to address the health and wellbeing priorities within our district. We will also aim to engage with the wide range of local organisations and charities who are working to improve the health and wellbeing of residents.

Furthermore, through work with the Essex Health and Wellbeing Board and our local health and wellbeing group (Livewell Chelmsford), we will aim to keep track of the work that addresses our health and wellbeing priorities. We will also review our approach to ensure evidence-based best practice is achieved.

## 6 Chelmsford City Council's contribution to Public Health



The scope of public health is very broad, with many government bodies, organisations, and voluntary sector organisations all playing an important role in its delivery. Our health is primarily determined by factors other than health care. While as a Council, we are not directly involved with an individual's healthcare, our key functions influence health. The Government believes that many of the wider determinants of health, for example, housing, economic development, and transport can be easily impacted by local authorities, who have overall responsibility for improving the local area for their populations. Local authorities are well-placed to take a very broad view of what services will impact positively on the public's health and combine traditional "public health" activities with other activity locally to maximise the benefits for better health outcomes.

Essex County Council has the statutory duty for public health across all the districts in Essex. However, as identified in the Kings Fund report "The district council contribution to public health: a time of challenge and opportunity" (2015), local authority functions have the opportunity to influence health and wellbeing positively.

Essex County Council has identified the need to work closely with local district councils to develop our collective approach in securing further improvement in public health across Essex through the development of local solutions and upscaling good practice.

To further develop the public health capabilities within our Council, an Internal Public Health Officers group was set up to promote better collaboration for health between internal departments, which in turn enables joint ownership of the health and wellbeing agenda across projects and initiatives. This group is formed of representatives from Environmental Health, Parks and Green Spaces, Community Sport and Wellbeing Development, Planning Policy and the Arts and Culture services.

Our Corporate Plan highlights the Council's commitment to putting plans into place to make our society a safer, greener, fairer, and better-connected place. Below is a brief outline of the Council's practical public health interventions which contribute to the wider health and wellbeing quality of life for an individual based on the Corporate Plan themes:



## 6.1 A safer and greener place

In this Corporate theme, we aim to make the district a more attractive place, promoting Chelmsford's green credentials, ensuring communities are safe and creating a distinctive sense of place.

A wide range of services within the council contribute to achieving this aim. This includes planning for sustainable communities as new housing development planned for the future will mean that our population will evolve and increase significantly with an estimated 11,970 more people between 2015 and 2025 (Chelmsford Local Authority Portrait, 2016). It is important to recognise the significance and long-term effects of new development design, including considerations to air quality and in shaping communities now and in the future. Our Parks and Green Spaces services are also key contributors to this theme, and we recognise that access to green space and the opportunity to engage and connect with nature is a significant way to reduce mental distress and promote mental wellbeing, while also increasing the likelihood of physical activity across all age groups.

On the safer element of the theme, addressing and tackling crime and disorder, anti-social behaviour, drug and alcohol use helps create healthy, safe and sustainable places and communities. Under the Crime and Disorder Act, our Community Safety Partnership is responsible for reducing crime and disorder. Also, under the Licensing Act 2003, we can target health and wellbeing issues within a pro-active and standardised approach to premises checks were our objectives are taken into consideration when determining a licence to ensure public safety.



## What we do and will do:

- Annually refresh the Safer Chelmsford Partnership Plan and in partnership with key stakeholders such as Essex Police, and voluntary partners to respond to increasing levels of crime and addressing our priorities
- Listen to local concerns and respond timely to reports of issues of concern
- Ensure appropriate resources are available to tackle crime
- Deliver the Community Safety Action Plan
- Annually conduct the public perception of safety survey
- Work with partners to tackle anti-social behaviour using the appropriate tools and powers to enforce action
- Carry out statutory safeguarding duties to safeguard children and vulnerable adults and respond to reported concerns
- Play an active role in the Safer Chelmsford Partnership
- Complete a strategic assessment annually, which informs our strategic priorities based on crime and health data, public perceptions and use of crime severity scores.
- An annual public event in partnership with the OPFCC and Essex Police to enable residents to voice their concerns
- Promote more innovative and sustainable design through robust planning policies and supplementary planning documents
- Develop and implement the Air Quality Strategy
- Implement the Green Infrastructure Strategic Plan
- Reinforce and extend the connectivity of, and accessibility to, Green Infrastructure resources

- Address and prepare for the effects of climate change through using Green Infrastructure resources
- Use Green Infrastructure to advance health and wellbeing for residents through access to high-quality open spaces which are connected and provide a diverse range of recreational and amenity benefits

## Find out more:

- Licencing: [www.chelmsford.gov.uk/business/licensing/](http://www.chelmsford.gov.uk/business/licensing/)
- Community Safety: [www.chelmsford.gov.uk/communities/community-safety/](http://www.chelmsford.gov.uk/communities/community-safety/)
- Parks and Green Spaces: [www.chelmsford.gov.uk/parks-and-allotments/](http://www.chelmsford.gov.uk/parks-and-allotments/)





## 6.2 Fairer and inclusive growth

In this Corporate theme, we aim to promote sustainable and environmentally responsible growth to stimulate a vibrant, balanced economy, a fairer society and provide more housing of all types.

A wide range of services within the council contribute to achieving this aim. These services include planning for sustainable communities, where our Local Development Framework outlines the strategic priorities and long-term vision for Chelmsford and identifies locations for delivering houses and other strategic development needs such as employment, retail and transport development. Our Housing Standards and Housing Solutions Team also contribute to achieving this aim in various ways, such as, implementing the Disabled Facilities Grant which can help people to stay in their homes and live independently for as long as possible and through homelessness prevention measures.



## What we do and will do:

- Seek an appropriate range of housing tenures including rented and intermediate products based on local evidence of need
- Seek an appropriate range of house types/ sizes, including “lifetime homes” which can be adaptable and accessible
- Charge Community Infrastructure Levy to new developments to help fund improvements to infrastructure locally
- Support new and enhanced retail, leisure and commercial development through protecting existing assets and supporting growth in these sectors
- We ensure that homelessness prevention remains as one of our key priorities
- Maintain the new development of ‘modular’ temporary accommodation to help families and individuals who become homeless
- Work with our registered providers to ensure we provide sufficient affordable housing to those in greatest housing need from our housing register
- Implement our homelessness strategy which sets out a proactive approach to preventing homelessness and review it annually
- Re-establish our school-based programme to raise awareness of housing issues
- Use our enforcement powers to protect tenants in the private rented sector from the effects of poor housing standards
- Bring empty homes and properties back into use
- Support people to access housing by providing financial assistance (rent guarantee), housing support and budgeting advice
- Partner with external agencies with significant expertise in guiding and supporting homeless people

## Find out more:

- Chelmsford Local Plan:  
[www.chelmsford.gov.uk/planning-and-building-control/planning-policy-and-new-local-plan/new-local-plan/](http://www.chelmsford.gov.uk/planning-and-building-control/planning-policy-and-new-local-plan/new-local-plan/)
- Neighbourhood Planning:  
[www.chelmsford.gov.uk/planning-and-building-control/planning-policy-and-new-local-plan/new-local-plan/neighbourhood-plans-and-village-design-statements/](http://www.chelmsford.gov.uk/planning-and-building-control/planning-policy-and-new-local-plan/new-local-plan/neighbourhood-plans-and-village-design-statements/)
- Housing Standards:  
[www.chelmsford.gov.uk/housing/private-tenants/housing-standards/](http://www.chelmsford.gov.uk/housing/private-tenants/housing-standards/)
- Housing services:  
[www.chelmsford.gov.uk/housing/homelessness/](http://www.chelmsford.gov.uk/housing/homelessness/)



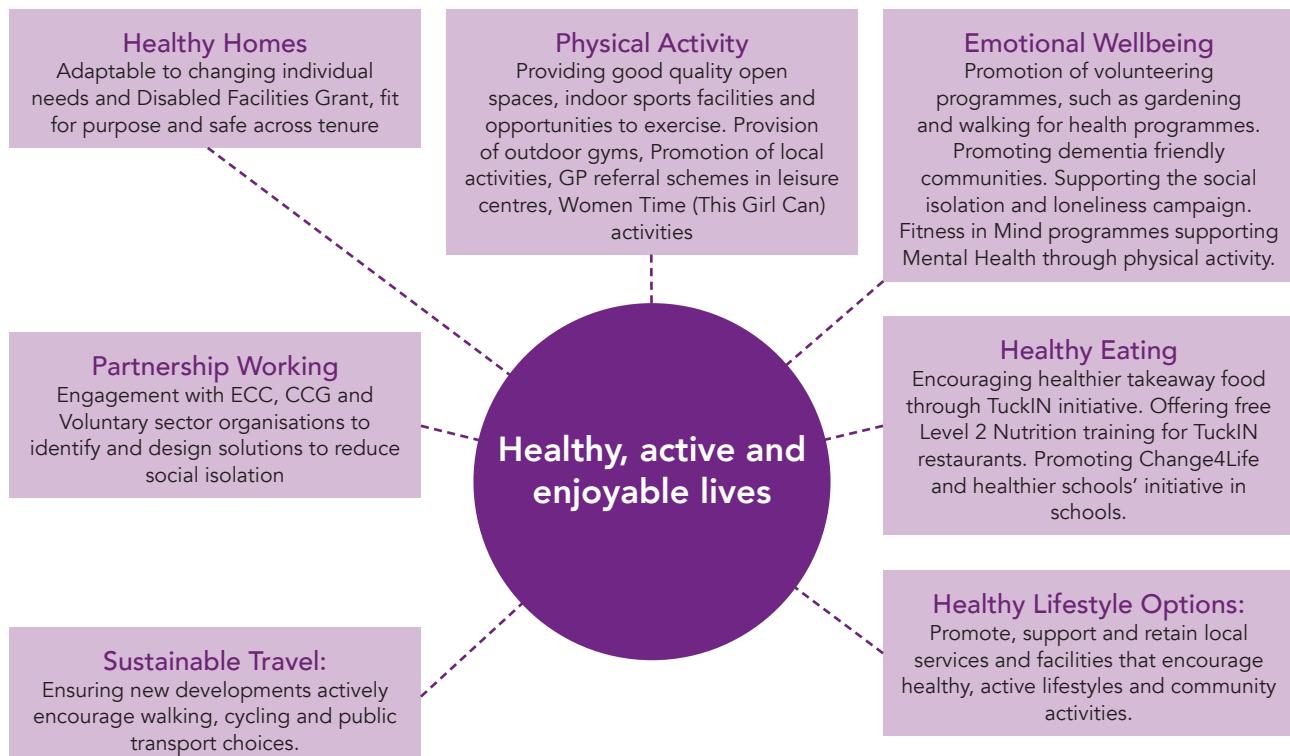


## 6.3 Healthy, active and enjoyable lives

In this Corporate theme, we aim to encourage people to live well by promoting healthy, active lifestyles and reducing social isolation, making Chelmsford a more enjoyable place in which to live, work and visit.

A wide range of services contribute to helping people at all stages of their lives to enjoy the best possible health and quality of life. These practical public health interventions provided by our council services are through leisure facilities, sports development, environmental health services, parks and green spaces and arts and cultural facilities.

As a council, we want to foster environments where everyone can and are able to engage in physical activity and sport. Our Sport and Leisure Team work in partnership with Active Essex and key stakeholders forming an Active Chelmsford Network to support the active agenda in helping the inactive become more active in line with the national agenda set by Sport England. Our Local Development Framework policies cover issues such as the provision of walking and cycling routes, provision of leisure and cultural facilities, access to green spaces, allotments and green infrastructure. Our Environmental Health services are statutory duties that prevent environmental factors that can potentially affect the health of residents, alongside these services, a number of public health initiatives have been delivered to further public health improvement such as; TuckIN working with small food businesses to make food healthier by reducing sugar, fats, salt and calories. Also, promoting airTEXT, a free public service provided by the council for public information on air quality alerts and health advice for those susceptible to poor air quality and pollen.



## What we do and will do:

- Promote walking, cycling and active travel through the design of new development
- Encourage and support a range of local services and facilities that encourage healthy, active lifestyles and community activities which are accessible by walking, cycling and public transport
- Encourage developers to utilise Health Impact Assessments to positively shape their development proposals
- Introduce a new health and wellbeing Livewell accreditation for new residential developments
- Encourage new development to include the provision of community facilities including health, education, social, leisure and cultural facilities
- Work in partnership with Active Essex and to deliver the Active Chelmsford plan
- Following investment in Riverside Leisure Centre, ensure the facilities inspire more people to participate in sport.
- Invest in parks and sports facilities and new outdoor gyms facilities
- Encourage and support local walking schemes and cycling initiatives with a focus on active travel
- Encourage and promote healthy eating initiatives
- Work with people with a disability to remove any barriers to participation in physical activity
- To develop a project to provide physical activity opportunities and support for people with mental health issues

## Find out more:

- Environmental health: [www.chelmsford.gov.uk/environment/](http://www.chelmsford.gov.uk/environment/)
- Parks and Green Spaces: [www.chelmsford.gov.uk/parks-and-allotments/](http://www.chelmsford.gov.uk/parks-and-allotments/)
- Leisure, theatres and museums: [www.chelmsford.gov.uk/leisure-theatres-and-museums/](http://www.chelmsford.gov.uk/leisure-theatres-and-museums/)
- Active Essex: [www.activeessex.org/](http://www.activeessex.org/)
- A new Cultural Forum- Ignite Chelmsford: [ignitechelmsford.org.uk/](http://ignitechelmsford.org.uk/)



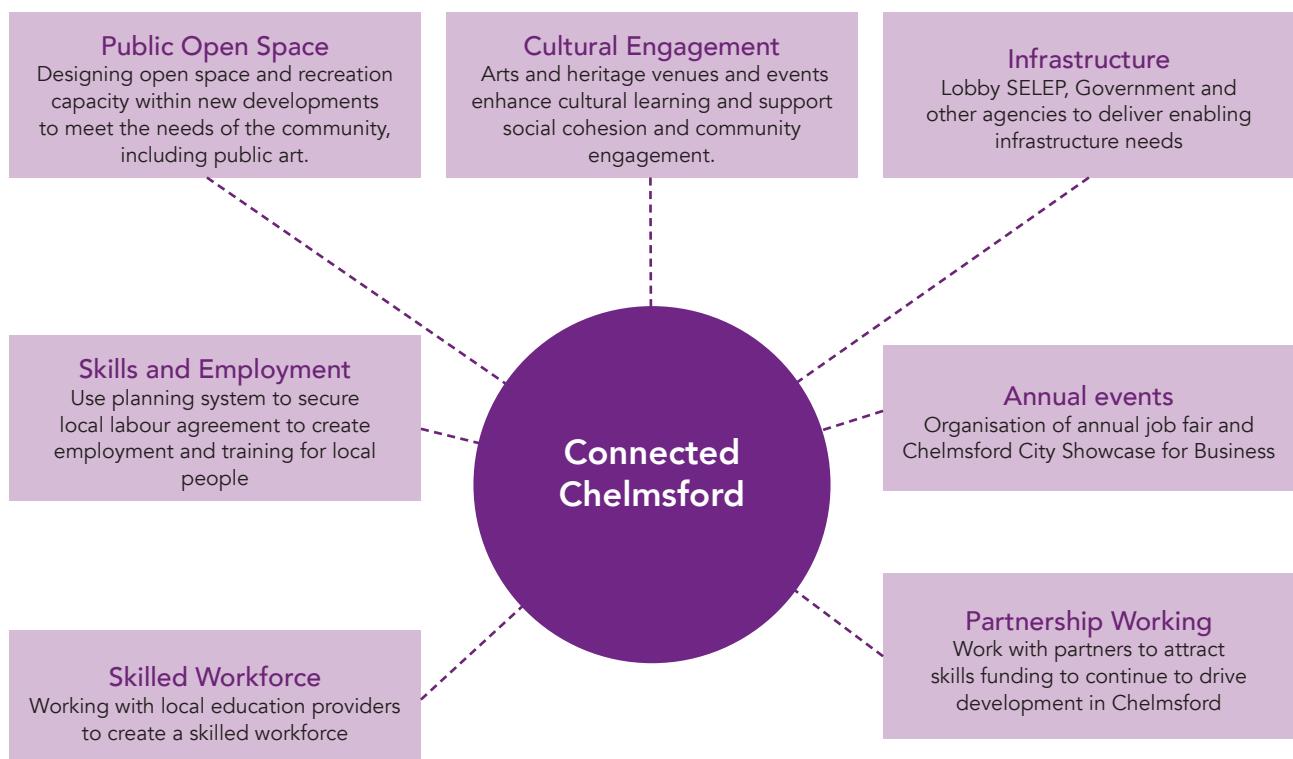


## 6.4 Connected Chelmsford

In this Corporate theme, we aim to bring people together, empowering local people and working in partnership to build community capacity, stronger communities and secure investment in the City.

A wide range of services within the council contribute to achieving this aim, such as our Economic Development Strategy, which aims to help businesses, attract inward investment and growth and provide more innovation. As good health underpins a healthy economy, our Economic Development Team plays an important role within our community by working to enhance educational attainment, skills, reducing unemployment and promoting local employment and business investment.

As people stay healthy through social connections, our cultural venues, events and engagements activities can help in delivering positive health outcomes through enhancing cultural learning in the district, supporting objectives of delivering social cohesion and promoting community engagement. Our Arts and Culture Team have made progress in building Cultural Networks in the community, forming a Cultural Partnership to support the delivery of the Cultural Strategy and its action plan. Through events and programmes across Chelmsford, in venues, parks and public open spaces, conversations, engagement, interactions and support mechanisms can be established. Evidence shows that arts and cultural participation have clear benefits for enriching people's lives, improving their health and wellbeing (Creative Health All Parliamentary Group Report, 2017).



## What we do and will do:

- Encourage local communities to prepare local guidance through neighbourhood plans to help shape their areas to deliver and meet communities needs
- Promote inclusive communities through the well-connected, and high quality designed spaces with access to green and open spaces.
- Engage with communities through consultations to provide opportunities for local people to help shape where they live
- Protect and enhance community assets
- Support the development of thriving communities, local engagement, and the promotion of healthy lifestyles by providing inclusive opportunities for being active
- Promote volunteering opportunities at our Parks, Museums, Sports Facilities and wider volunteering opportunities with the Volunteering Centre
- Offer a wide range of enquiry-led sessions in our museum
- Invest in the Museum redevelopment project which includes an activity plan over three years that looks to increase participation and engagement
- Work with partners to attract funding to continue to develop Chelmsford's cultural offering
- Support the establishment and encourage the development of the Chelmsford Cultural Development Trust, who will ensure the City's Cultural ambition remains big and high; Push for a long term and diverse thinking; Offer strategic support, guidance and connections; Provide fundraising support toward the Cultural growth of the City
- Support establishment and encourage the development of Ignite Chelmsford: a thriving platform of diverse voices, views, ideas, opinions and projects to underpin the work of the Cultural Development Trust and ensure they remain locally rooted and responsive; underpinned by the Chelmsford Cultural Partnership
- Support the establishment and encourage the development of the Chelmsford Local Cultural Education Partnership
- Work in partnership to embed the principles of 5 Ways to Wellbeing in the community and enhance the social prescribing and self-care, self-refer offer for Chelmsford to connect to local activities.
- Deliver enabling infrastructure by lobbying SELEP, Government and other agencies to support our infrastructure needs
- Secure additional support for those facing barriers to employment by working in partnership with DWP
- Work in partnership with DWP/ Job Centre and other partners to target harder to reach groups
- Continue to work in partnership with Chelmsford Volunteering Centre to offer expert, central brokerage and support for Chelmsford's volunteering offer
- Continue wider skills group partnership, with partners from DWP, County Council, NEET teams, STEAM and specific skills support organisations (e.g. offenders' rehabilitation and disability confident) in the organisation of events and activities to support skills provision for those with barriers to employment
- Use the planning system to secure Local Labour Agreements, creating employment and new training opportunities for local people
- Build successful partnerships through the South East Local Enterprise Partnership including South East Creative Enterprise Network and Chelmsford Business Board



- Create a skilled workforce by ensuring the local workforce has the necessary skills to meet the needs of the business by working with local skills providers such as Anglia Ruskin University, Writtle University College and Chelmsford College
- Work with partners to attract skills funding to continue to drive development in Chelmsford
- Deliver public realm improvements such as Bell Meadow and Station Square to ensure quality and safer pedestrian access to public spaces.
- Work with Network Rail, Countryside Zest, Essex County Council and Abellio Greater Anglia to deliver Beaulieu Station

## Find out more:

- A new Cultural Forum- Ignite Chelmsford: [ignitechelmsford.org.uk/](http://ignitechelmsford.org.uk/)
- Chelmsford Economic Strategy [www.chelmsford.gov.uk/business/business-news-events-and-advice/local-information-and-data/](http://www.chelmsford.gov.uk/business/business-news-events-and-advice/local-information-and-data/)
- Census and Economic Data [www.chelmsford.gov.uk/your-council/data-and-statistics/census-and-economic-data/](http://www.chelmsford.gov.uk/your-council/data-and-statistics/census-and-economic-data/)



## 7 Strategic themes (Livewell)

Improvement in health and wellbeing can be most effectively delivered in partnership through the Livewell programme. All Local Authorities in Essex, along with wider partner agencies, have come together to collaborate on the health and wellbeing agenda.

The Livewell branding enables work to be categorised in relatable formats, which can be used to convey appropriate messages through social marketing. The Livewell website has been designed to provide information about all that is on offer in Chelmsford and across Essex to improve health and wellbeing.

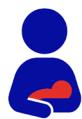
[www.livewellcampaign.co.uk](http://www.livewellcampaign.co.uk)

**The brand promotes the following messages:**



### Bewell:

Being active on a daily basis is not only important for physical wellbeing, but it can greatly benefit mental wellbeing too.



### Startwell:

Giving children the best start in life by supporting families.



### Eatwell:

Eating a healthy, balanced diet is crucial for ensuring our bodies receive important nutrients for growth and repair and we maintain a healthy weight, at any stage of life.



### Staywell:

Seeking help and support is not a weakness, it's a sign that you are facing your challenges. There are numerous services available within your area that can help with various topics, such as alcohol support, smoking services and weight management sessions for adults and children.



### Feelwell:

How happy or sad we feel is not always detected by others, yet how we feel can greatly influence how well we eat, how active we are and generally how we live our lives. It is therefore just as important to feel well throughout our lives.



### Agewell:

We are all ageing, and we all know people, whether they are relatives or friends, that are older than us. In the UK, there are now more people over the age of 60 than under the age of 18. Therefore, being aware of how to live healthily into old age, and the support that is available is important



### Connectwell:

Encouraging people and partners to connect into local activities to enhance and encourage self-care and build community resilience  
[connectwellessex.org.uk](http://connectwellessex.org.uk)



### Livewell Linkwell:

A free and confidential social prescribing service that provides practical or emotional support of a non-medical nature.



## 8 Health and Wellbeing priorities

Livewell Chelmsford has identified five key health and wellbeing priorities to address informed by the local Public Health Portrait (2016) which forms part of the Essex Joint Strategic Needs Assessment, Public Health England's District Health Profile (2018) and Local Government Association inform.

**The five-key health and wellbeing priorities identified for Chelmsford include:**

1. Reduce excess weight and obesity and increase physical activity in adults and children
2. Alleviate loneliness and social isolation
3. Improve poor housing including fuel poverty and thermal comfort
4. Enabling people to agewell in Chelmsford
5. Reduce alcohol, substance misuse and behavioural addictions (including supply of illegal substances)

For each of these priorities, we have sought to identify action for every stage of the "life course" using the livewell themes where appropriate; Startwell, Bewell, Eatwell, Staywell, Feelwell and Agewell.

The agreed priorities are described below:



## 8.1 Priority 1

### Reduce excess weight and obesity and increase physical activity in adults and children

#### Rationale

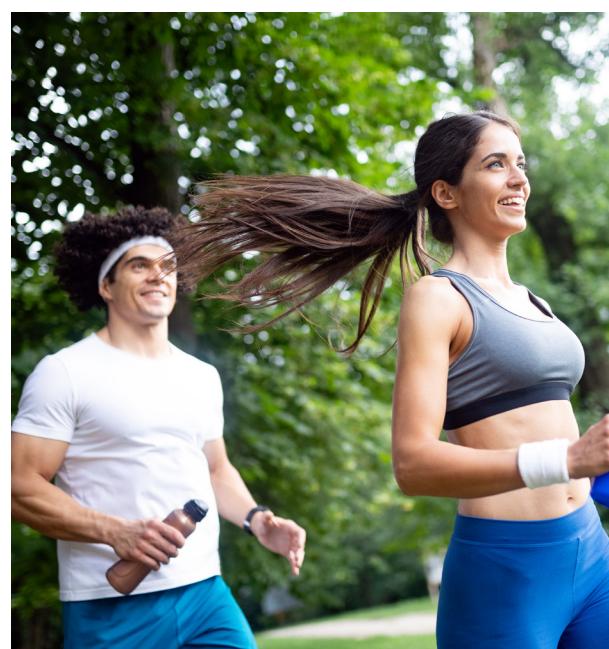
The rising prevalence of obesity is a global and national health problem. The fundamental cause of obesity is an imbalance between energy intake and energy expenditure. However, a number of factors can influence this, including genetics, lifestyle, and medication. According to the Health Survey England, 26.2% of adults in England are obese, and a further 35.2% are overweight, making a total of 61.4% adults who are either overweight or obese in England.

The Government's National Child Measurement Programme (NCMP) (2017-18) found that just under a quarter of children in reception, aged 4 to 5, were overweight including obese and severely obese and over a third in year 6 aged 10 to 11. The report also found that the prevalence of obesity for children living in the most deprived areas was more than double of those living in the least deprived areas for both reception and year 6. As child obesity is good indicator of adult obesity which can lead to poor health outcomes, there is also concern about the rise of childhood obesity and the implications of such obesity persisting into adulthood.

Obesity is associated with and increases the risk of developing a number of health conditions such as type 2 diabetes, coronary heart disease, and stroke and can also exacerbate conditions such as asthma and psychological problems such as social isolation and low self-esteem.

In Chelmsford, 57.4% of adults are classified as overweight or obese, 20.6% children in reception are overweight or obese and 29.7% children in Year 6 are overweight or obese. On the other hand, the Active Lives Survey (17/18 report) reported that 26.4% of adults are inactive, having less than 30 minutes of physical activity and only 58.1% of adults are achieving at least 150 minutes of physical activity a week. Similarly, only 16.7% children in school years 1-11 are active for 60 minutes or more every day and 28.2% of children are less active, achieving less than an average of 30 minutes a day of physical activity.

The above figures show that residents need to do more to improve their levels of physical activity to benefit their health and to achieve a lower risk of cardiovascular disease, stroke, and coronary heart disease. This may mean creating more opportunities for people to do so and adopting a whole system place-based approach that addresses the wider environmental causes and supports behaviour change. The Chief Medical Officer's guidelines (2019) for physical activity states that physical activity is defined as any bodily movement and takes many forms across many settings. Health-enhancing physical activity includes multiple types of activity: cardiovascular; muscle and bone strengthening; and balance training.





## What we do and will do:

### Bewell:

- Promote and encourage engagement in physical activities through our Active Chelmsford Network, livewell campaign, Connect Well and other partners.
- Work within the planning system to create healthier built environments designed to support healthy lifestyles choices.
- Work in partnership to maximise and encourage the use of green space for exercise.
- Support and promote active travel initiatives, such the Local Cycling and Walking Implementation Plans and the City Centre Growth Package
- Deliver the 'Every Child Every Day' initiative in primary schools tackling obesity in children and supporting mental health. Expand this project into the Livewell Child project for primary schools.

### Eatwell:

- Produce and implement a Food Plan to raise awareness of healthy eating and accessing healthier and more sustainable diets.
- Promote healthy eating through initiatives such as Tuck IN and allotment schemes.
- Work in partnership with local businesses to reduce the impact of the proliferation of hot food takeaways
- Deliver the Fit & Fed scheme aiming to provide food for children who experience food poverty and poor nutrition and to increase physical activity.



## 8.2 Priority 2 Alleviate loneliness and social isolation

### Rationale

Social isolation is characterised by an absence of social interactions, social support structures, and engagement with wider community activities. Loneliness describes an individual's personal subjective sense of lacking contact with social interactions to the extent that they are not wanted or needed. Loneliness and isolation have both been identified as part of the most significant public health challenges of our time and one of the most significant risks to the quality of life for older people.

Anyone can experience social isolation and loneliness. There are a wide range of factors that can exacerbate feelings of being socially isolated or experiencing loneliness. This includes; demographic changes, retirement, and bereavement, disability, becoming a carer or hospitalisation. Research suggests that feeling lonely or socially isolated is linked to increased risk of heart disease or stroke and depression (British Cardiac Society, 2016).

In 2018, the Government published a strategy on tackling loneliness and building a connected society to identify actions to design in support for social relationships. As the way we live, work, and interact with each other is shifting towards a more digital society and as employment practices change and individuals participate in society in different ways. Studies have shown that services that reduce loneliness have resulted in fewer GP visits and lower incidence of falls (Campaign to End Loneliness, 2018).

Livewell Chelmsford has prioritised loneliness and social isolation because it recognises that it can have a significant impact on mental and physical health. At present, there is limited data available that robustly measures social isolation locally. However, according to the Essex Horizon Scan report (2016), the number of people who are lonely is forecast to grow to 1.5 million by 2035, with over 15,000 households in Essex currently at high risk. Also, an ageing society is one of the key drivers of social isolation, and Chelmsford has a relatively high proportion of over 65s with 28.5% of pensioners living alone. However, loneliness also affects younger age groups. According to the Office for National Statistics (2018), young adults are more likely to feel lonely than older age groups. They found that people aged 16 to 24 were "always or often" lonely, which was three times higher than people aged 65 and over.

A range of services provided by the Council have the potential to impact on social isolation, even if this is not the primary aim, for example, the natural and built environment can help or hinder efforts to enhance social interactions. In addition, our voluntary sector partners help build personal and community resilience.





## What we do and will do:

### Bewell:

- Promote physical activity through our Active Chelmsford Network, livewell campaign, Connect Well and other partners for all age groups
- Ensure that programming of events and activities does not exclude those who are alone



### Feelwell:

- Promote health and wellbeing messages through livewell and Council communications and other partners
- Promote the use of Connect Well for social interventions and capitalise on the use of local Link Workers through the Live Well, Link Well social prescribing initiative.
- Engagement with the Essex County Council's reducing social isolation forum's local initiatives
- Support implementation of the Ideas Hub through our Cultural Partnership Forum
- Work with partners and organisations to develop a city-wide programme of events and cultural activities that are reflective of our communities.
- Provide support and information in accessible ways and encourage communities to be involved in co-design and development of activities. For example, work with community leaders to develop creative activities within the local area such as Men in Sheds, Knit and Natter and Youth Theatre groups.

### Agewell:

- To work within the planning system to ensure improved infrastructure to support healthy lifestyle choices, such as access to community facilities and improved access to public transport.
- Work with partners and organisations to develop events and cultural programmes that are accessible to communities, and through outreach, harnessing existing relationships in the community and providing support and information in accessible ways. For example, artist-led reminiscence workshops in the community which include a film or dance at the theatre

## 8.3 Priority 3

### Improve poor housing including fuel poverty and thermal comfort

#### Rationale

The quality of housing greatly affects the health and wellbeing of residents. Poor housing can be a result of inadequate insulation, poor, and expensive heating systems. This can cause many preventable diseases and injuries, including respiratory diseases such as asthma and bronchitis, cardiovascular diseases, and cancer. It can also have a detrimental impact on mental health. Studies confirm that the home environment is a quantifiable determinant of health, quality of life, and wellbeing. In the UK, over 25,000 people die each year as a result of living in cold temperatures, and much of this is due to living in poorly heated homes. Furthermore, living in cold homes can increase the risk of falls and other accidents. Poor housing is estimated to cost the NHS at least £2.5 billion a year in treating people with illnesses directly linked to living in cold, damp, and dangerous homes (Local Government Association, 2019).

Chelmsford's housing market is made up of private, private rented, and social sectors. With 73.8% of household's owner-occupied, 13.1 % social tenants and 13.0% private tenants. At the last census (2011), 2.2% of households in Chelmsford did not have central heating, with the highest proportion of these households in Springfield North Ward (4.3%). High energy prices combined with low income means 7.9% of people in Chelmsford are considered to be living in fuel poverty. A household is considered fuel poor if it spends more than 10% of its income on fuel to maintain an adequate standard of warmth. MSOA 001 (Boreham and the Leighs, Broomfield and the Walthams) has the highest fuel poverty at 12.3% compared to the England average of 10.6%. Between August 2013 to July 2017 there were 341 excess winter deaths in Chelmsford and 20.3% between 2016/2017.

To reduce the risk to health from living in poor housing conditions, the Council will work in partnership with local organisations and partners in order to raise awareness of the opportunities available to reduce fuel bills and staying warm throughout winter months.





## What we do and will do:

### Staywell:

- Promote energy switch schemes and engage in initiatives that aim to help heat homes and reduce fuel bills.
- Partnership working to deliver the Warm Homes Fund project
- Engage with energy suppliers to identify households that would benefit from energy efficiency improvement through the Energy Company Obligation- Help to Heat Scheme.
- Engage with Fuel Poverty forums for partnership working and building a collaborative network. Engagement in central government funding to support vulnerable homes and to identify best practice and share lessons learned.
- Provision of the discretionary interest-free Healthy Homes Loan for repair works to a property to remedy health and safety hazards.
- Our art and cultural services work with partner and organisations to develop engagement events and cultural programmes that are reflective of our communities. For example, delivering a temporary exhibition at the museum which shows the different ways and the suffering of the past generation in heating homes

### Agewell:

- Promote schemes and programmes that aim to prevent falls in the City through livewell.
- Partnership working to fund a handyman works for home improvements/ home security.



## 8.4 Priority 4 Enabling people to age well in Chelmsford

### Rationale

According to the JSNA (2016), Chelmsford has a relatively high proportion of over 65s and a 23% increase is expected between 2015 and 2025, from 32,700 to 40,100 over 65s. This will represent 22% of the total population in the district. An ageing population puts a high demand on health, social care services, and housing needs. It is therefore important for us to help people to age well and remain independent for as long as possible. This includes areas of work, such as helping to prevent falls amongst those at risk and enabling people to live well with dementia.

### Preventing and reducing falls

The risks and consequences of a fall amongst older people are particularly high, with potentially severe pain, injury, and loss of independence. Falls are a common and serious health issue for older people with around a third of all people aged 65 and over falling each year, increasing to half of those aged 80 and over. According to Public Health England, the standardised rate for hip fractures in people aged 65 and over in Chelmsford for 2017/18 was 565 per 100,000 compared to the England rate of 578.

Preventing falls is important for the health and wellbeing of older people and those that care for them, as well as the future of our health and social care services. Fortunately, many falls and fractures can be prevented by well organised services, including those within the community and organisations working in partnership. For example, engaging older people in regular physical activity to develop and maintain strength and balance.

### Enabling people to live well with dementia

Dementia is an umbrella term that is used to describe a group of progressive symptoms such as memory loss and changes in personality. While dementia is a degenerative condition, people can live with it for 7-12 years after diagnosis, so it is important that people are able to live well with dementia for as long as possible.

According to the JSNA, Chelmsford has increasing numbers of people with dementia, 2,120 people aged over 65 are thought to have dementia, and this number is expected to rise by 66% to 3,520 by 2030. This will have an impact on health services, including training of staff, support for unpaid carers. Additionally, the Public Health profile for 2019 shows that the number of people with dementia, the dementia diagnosis rate is only 58.2% for persons aged 65+, this is significantly worse than the England average of 68.7% of people with dementia being diagnosed. A timely diagnosis enables people living with dementia, their carers, and healthcare staff to plan accordingly and work together to improve health and care outcomes.

Within this priority, it is important to recognise the contribution of carers and the need to support their health and wellbeing. Unpaid family carers are more likely to be socially isolated, experience poor health and young carers who are likely to experience mental health issues, including anxiety and depression, and achieve lower educational outcomes than non-carers.



## What we do and will do:

### Bewell:

- Promote physical activity initiatives aimed at preventing falls in older adults.

### Feelwell:

- Raise awareness of available information, signposting, and guidance for carers through the livewell platform and Connect Well (e.g., Action for Family Carers).
- Partnership working to develop engagement events and cultural programmes that are reflective of our communities, providing support and information in accessible ways, and encouraging communities to be involved in developing programmes. For example, Creative Journeys programme exploring the impact of participatory arts in care homes on the social relation of older people



### Agewell:

- Promote the Chelmsford Dementia Action Alliance and Dementia Friends initiative to continue to increase knowledge and understanding of dementia to ensure that people with dementia, their families and carers can continue to lead happy, healthy and fulfilling lives.
- Engage and work with the Chelmsford Dementia Action Alliance steering group, whose aim is to make Chelmsford a dementia friendly City.
- Raise awareness of support programmes that aim to prevent falls through livewell
- Hold our Annual Older People's Information Day dedicated to providing older people with relevant information and guidance on what local services are available to them.
- Partnership working on allocation of the Better Care Fund and Disabled Facilities Grant on home adaptations to help reduce health and social care cost and to reduce the risk of injury.
- Develop a Housing Assistance Policy to enable the provision of assistance to households living in the private sector to carry out repairs, improvements, and adaptations.
- Work with partners and organisation to develop events and cultural programmes that are accessible to communities and through outreach, harnessing existing relationships in the community and providing support and information in accessible ways.

## 8.5 Priority 5

### Reduce alcohol, substance misuse and behavioural addictions (including supply of illegal substances)

#### Rationale

Drinking alcohol and smoking can cause or contribute to the development of many preventable health conditions. Chelmsford has the fifth-lowest smoking prevalence in the county, which is not significantly different from the England average at 12% compared to an 18% national average. However, the prevalence of smoking is higher in people in routine and manual jobs (22.5%). Alcohol-related admissions to hospital in Chelmsford were 561 per 100,000 population in 2016/17, and it is estimated that there are 38.3 per 100,000 number of alcohol-related deaths. There were 329 arrests for drug possession in Chelmsford in the year September 2015 accounting for 13.3% of all arrests across the county.

332 adults and 43 young people were receiving treatment for drug abuse, plus 216 adults and 14 young people were receiving treatment for alcohol abuse in the district in 2014/15.

Reducing harmful drinking is one of our health and wellbeing priorities as it has a detrimental effect on the mental and physical health of an individual, and community safety. Since 2014/15, the rates of alcohol-related admissions have slightly increased. The reasons for alcohol misuse can be complex and are primarily driven by the price and availability of alcohol added to the social and economic determinants. Alcohol-related admissions can be reduced through local interventions to reduce alcohol misuse and harm.

A recent analysis of Hidden Harms areas showed that organised crime is one of the potential issues for the district, namely Gangs and County (Drug) Lines. Chelmsford faces issues of gangs and drug-related violence, and the risk factors of these issues are associated with substance and alcohol misuse, anti-social behaviour, deprivation, and pro-criminal peers and high unauthorised absence.





## What we do and will do:

### Staywell:

- Work in partnership with Licensing to ensure responsibility of for alcohol availability and act to reduce alcohol harms
- Work with commissioned alcohol and drug intervention providers and treatment agencies and alongside charitable organisations that are addressing the needs of the community.
- Deliver the Community Safety Action Plan; this includes the Crucial Crew initiative providing alcohol advice to 1500+ Year 6 annually
- Implement the Public Spaces Protection Order
- Promote smoking cessation and alcohol/ substance misuse services via livewell and Connect Well
- Partnership working to deliver services to support and prevent young people from getting involved in crime through the successful Early Intervention Youth Fund awarded to Essex
- Work effectively with the Essex Violence and Vulnerability Team based in our new community safety partnership hub

- Co-fund a Drug and Alcohol outreach worker and Homeless outreach worker referring to support agencies
- Work in Partnership with Essex Police on tackling drug trafficking through Operation Overwatch and Op Aegis
- Work in partnership with charities such as Gangslines, St Giles Trust and Reach Every Generation to deliver awareness training to young people, parents, and professionals on drug trafficking
- Art and cultural services partnership working to develop events and cultural programmes accessible to communities through outreach. For example, work with HMP and artists to explore root causes for substance misuse

### Feelwell:

- Delivery of the Chelmsford SOS Bus project in partnership with Open Road, Street Pastors and other partners
- Strategic representation and engagement in key groups such as the Mid Essex Stay Safe and Mid Essex Children's Partnership Board



## 9 Taking health and wellbeing forward- Making it happen

We aim to ensure that the outcomes of health and wellbeing work that have already been implemented will be effectively evaluated providing an evidence base to enable successful projects to continue.

Furthermore, through close partnership work, and the collaboration of ideas within our local health and wellbeing group – Livewell Chelmsford – we will continue to explore opportunities to implement new and innovative schemes that effectively promote good health.

We cannot achieve these priorities alone, delivering this strategy will not only require the Health and Wellbeing groups but all our partners and citizens.

### What will success look like?

Success will be measured locally and, on a County-wide basis against the Joint Health and Wellbeing Strategy, but longer-term, will be measured against improvements in the Public Health Profile indicators identified for the Chelmsford district.

We will also use the Thriving Places Index to help us look at the strengths and challenges of our City, to help us identify whether the conditions are in place for people to thrive, in a fair and sustainable way. The Thriving Places Index consists of a broad set of indicators from datasets produced by established national data agencies such as the Office for National Statistics (ONS), Public Health England (PHE) and the index of Multiple Deprivation. (IMD).

### For more information:

PHE Local Authority Health Profiles:  
[fingertips.phe.org.uk/profile/health-profiles](http://fingertips.phe.org.uk/profile/health-profiles)

Thriving Places Index:  
[www.happycity.org.uk/measurement-policy/thriving-places-index/](http://www.happycity.org.uk/measurement-policy/thriving-places-index/)

[/www.thrivingplacesindex.org/#](http://www.thrivingplacesindex.org/#)







# Glossary

- CCDT:** Chelmsford Cultural Development Trust
- CCG:** Clinical Commissioning Group
- DWP:** Department for Work and Pensions
- ECC:** Essex County Council
- EJHWS:** Essex Joint Health and Wellbeing Strategy
- JSNA:** Joint Strategic Needs Assessment
- MSOA:** Middle Super Output Area
- NEET:** Not in Education, Employment or Training
- NPPF:** National Planning Policy Framework
- OPFCC:** Office of the Police, Fire, Crime Commissioner (Essex)
- SELEP:** South East Local Enterprise Partnership
- STEAM:** Science Technology Engineering Arts and Mathematics
- STP:** Sustainability and Transformation Partnerships



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