

Health and Wellbeing Strategy

Baseline Position & Progress Update

Good mental wellbeing and social connectivity across the life course

Health & Wellbeing Board– 19th July 2023

Good mental wellbeing and social connectivity across the life course

cohesive and vibrant communities where all members feel included, valued and supported

Priorities

- To reduce social isolation and loneliness
- To support people with long-term physical and mental health conditions through the social prescribing network
- To reduce rates of suicide and self-harm
- To promote positive public mental health with the five ways to wellbeing

Key Indicators

- **Reduced** loneliness
- **Reduced** rate of emergency admissions for intentional self-harm
- **Improvement** in self-reported wellbeing scores (low satisfaction, low worthwhile, low happiness and high anxiety)
- **Reduced** suicide rate
- Social prescribing referrals (*indicator in development*)



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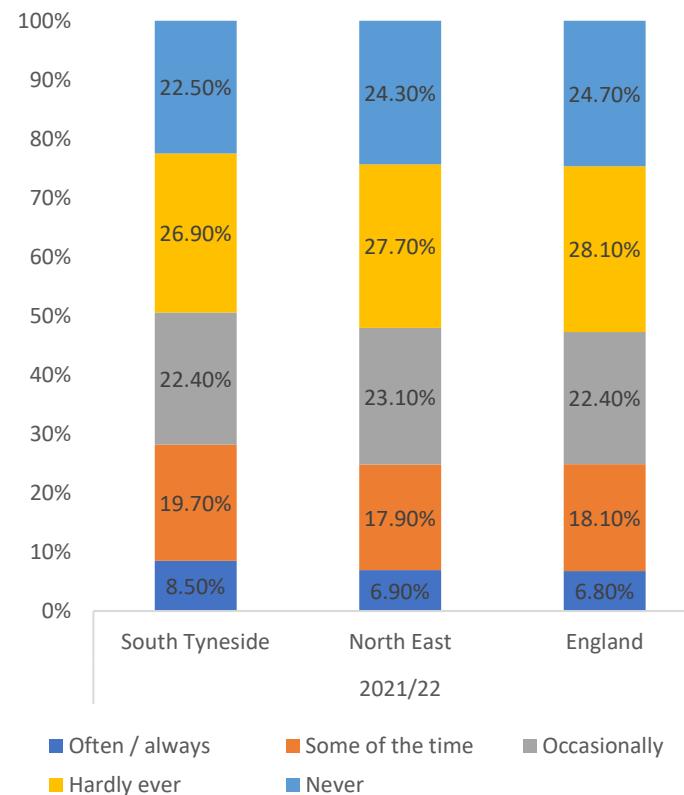
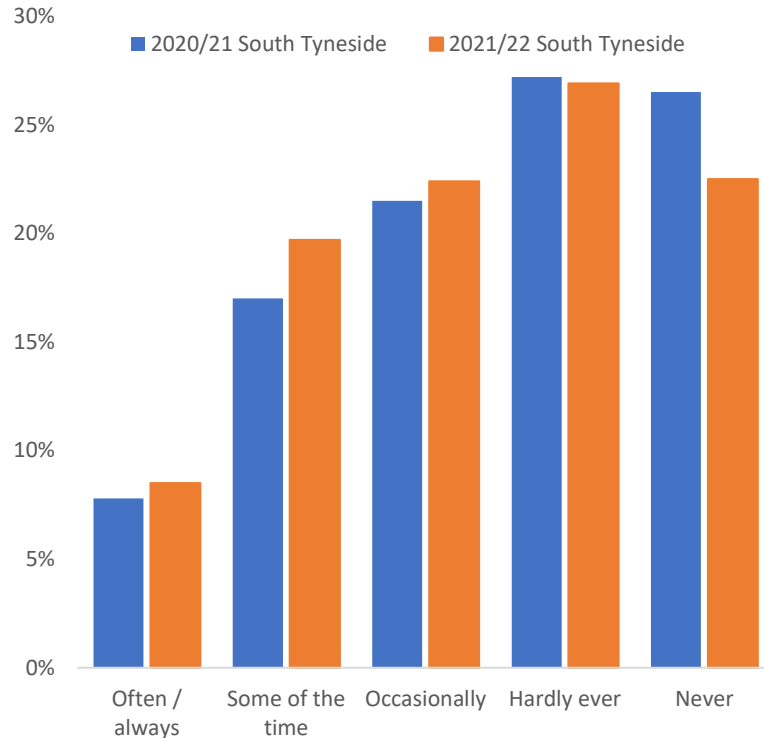
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Where are we now? Baseline Position

Loneliness (% of population 16+)

How often do you feel lonely? (% of population, 16+)



- In 2021/2022, an estimated 9,700 people in South Tyneside felt lonely 'often/always', with a further 21,100 feeling lonely 'some of the time'.
- **Between 2020/21 and 2021/22, the percentage of South Tyneside residents aged 16+ that said they **never felt lonely decreased**, while the percentage that said either 'often/always', 'some of the time' and 'occasionally' increased.**
- Compared to regionally (25.9%) and nationally (25%), South Tyneside (24.8%) had a slightly smaller percentage of people who said they felt lonely often/always or some of the time.



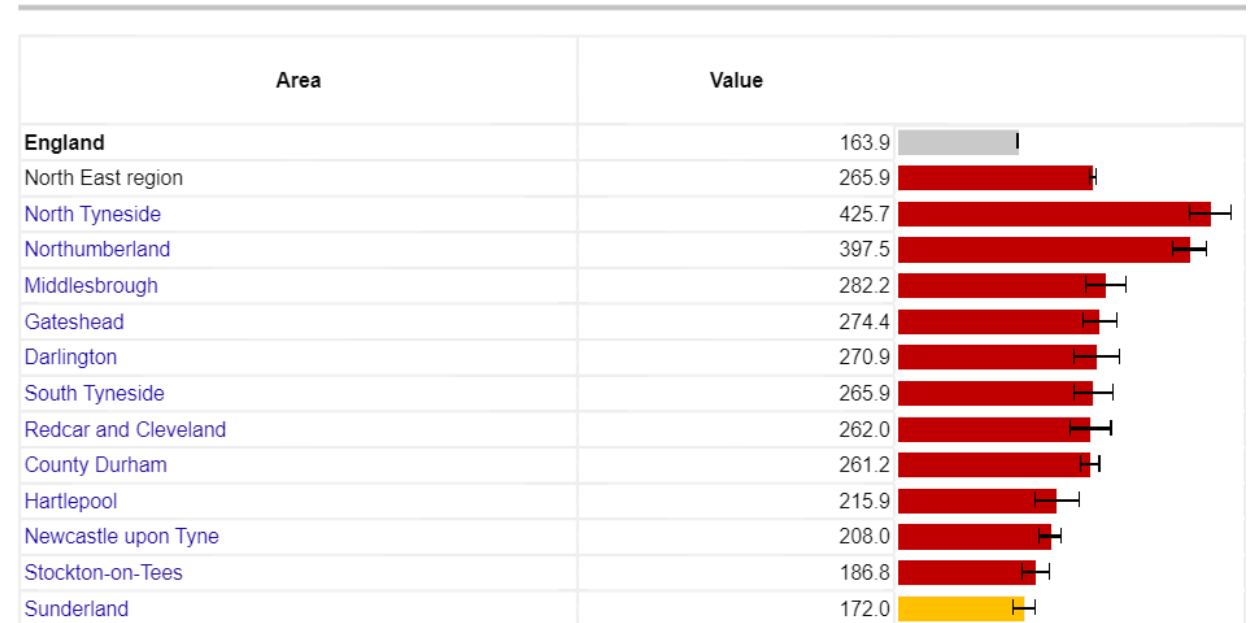
Where are we now? Baseline Position

Emergency Admissions for Intentional Self Harm (directly age standardised rate per 100,000)

- In 2021/22, there were **380 emergency hospital admissions** for intentional self-harm in South Tyneside.
- This is a directly age **standardised rate of 256.9 per 100,000** – **significantly higher than the England wide rate of 163.0 per 100,000** and the **same as the North East wide rate**.
- Statistically, South Tyneside's **female rate (348.4)** is **significantly higher than male rate (180.3)**.

Note: The official population estimates for mid 2012 to mid 2020 are in the process of being revised to incorporate the data now available from Census 2021. As such, this indicator is currently only presenting data for 2021. Once revised populations for mid 2012 to mid 2020 are published, the updated back series for this indicator will be published.

Emergency Hospital Admissions for Intentional Self-Harm 2021/22



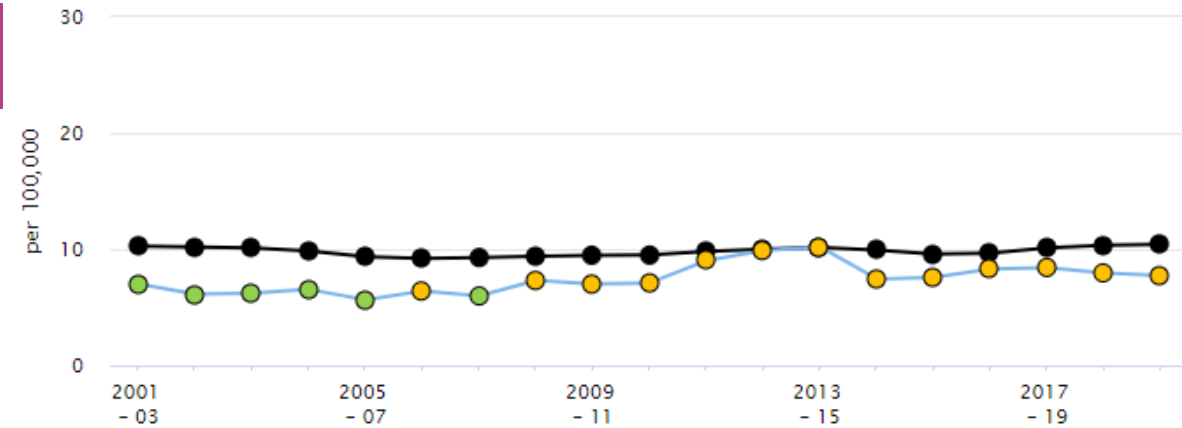
Where are we now? Baseline Position

Suicide Rate (directly standardised rate per 100,000)

- Since 2008-10, the suicide rate in South Tyneside has been **consistently similar to the England wide rate**. In 2019-21 – this was **7.7 in South Tyneside**, compared to **10.4 England wide**.
- In the same year, the South Tyneside rate was the **lowest of all North East local authorities**, and **significantly lower than the North East average**.
- Nationally:**
 - The **male suicide rate (15.9)** is **significantly higher** than the **female rate (5.2)**
 - While there is **no clear social gradient** by deprivation decile, the **40% least deprived decile rates** are **significantly below the average rate**.



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Area	Value
England	10.4
North East region	13.0
Redcar and Cleveland	19.8
Darlington	16.6
County Durham	15.8
Middlesbrough	14.9
Hartlepool	14.7
Sunderland	14.2
Newcastle upon Tyne	11.6
Northumberland	11.5
North Tyneside	11.0
Stockton-on-Tees	10.2
Gateshead	9.6
South Tyneside	7.7

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Where are we now? Baseline Position

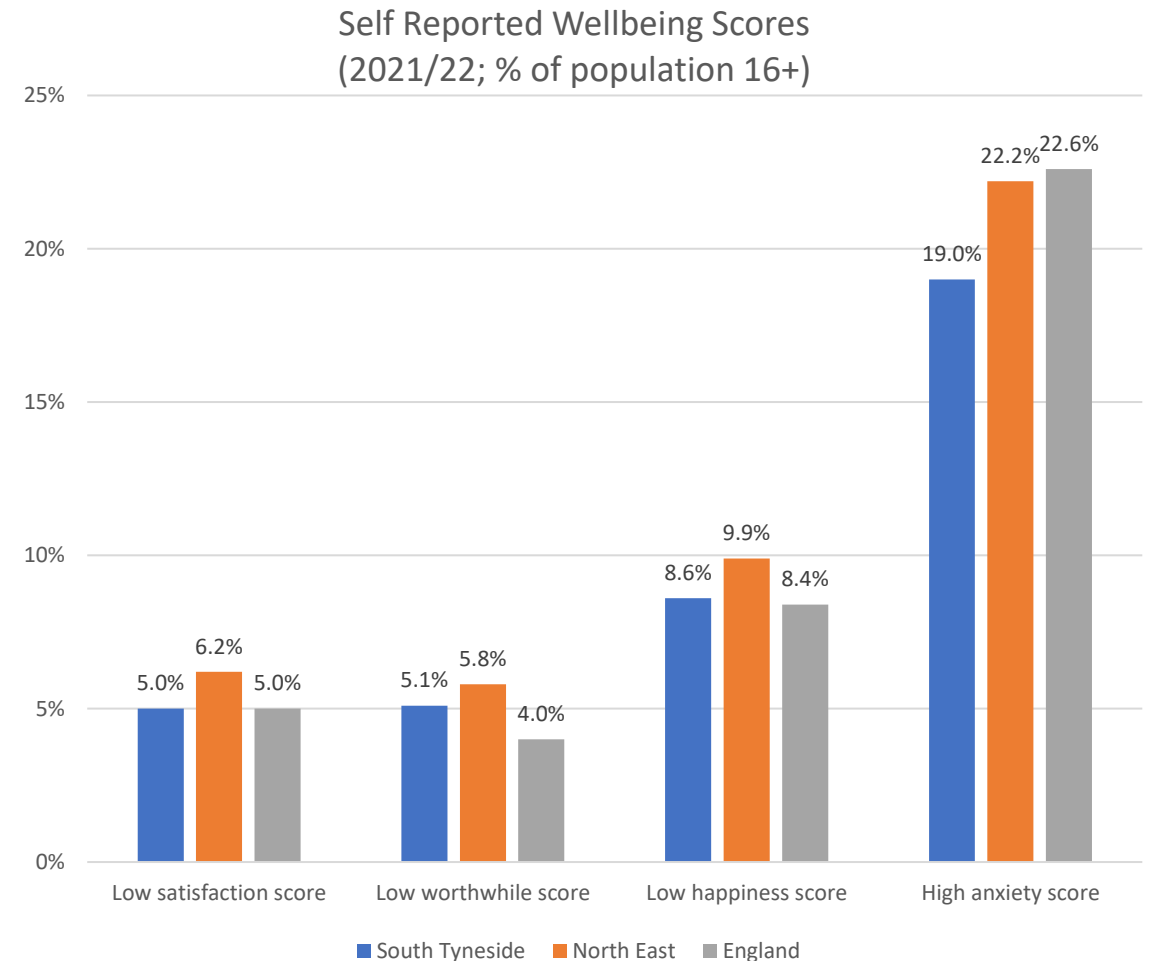
Self Reported Wellbeing (% of population 16+)

In 2021/22:

- 5% of South Tyneside residents aged 16+ reported a **low satisfaction score** (*not statistically significantly different to previous years*).
- 5.1% of South Tyneside residents aged 16+ reported a **low worthwhile score**, (*not statistically significantly different to previous years*).
- 8.6% of South Tyneside residents aged 16+ reported a **low happiness score** (*not statistically significantly different to previous years except 2-12/13 and 2013/14*).
- 19% of South Tyneside residents aged 16+ reported a **high anxiety score** (*not statistically significantly different to previous years – except 2011/12*).



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Where are we now? Baseline Position

Self-reported Wellbeing – England-wide Inequalities (2021/22; % of population 16+)

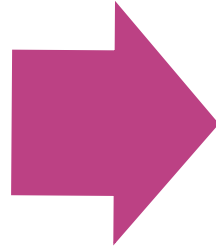
% people reporting a low satisfaction score was:	% people reporting a low worthwhile score was:	% people reporting a low happiness score was:	% people reporting a high anxiety score was:
<ul style="list-style-type: none">• <u>Significantly lower</u> for the ‘working’ population, compared to the ‘inactive’ or ‘unemployed’ population• <u>Significantly higher</u> for the ‘disabled’ population, compared to the ‘not disabled’ population• <u>Significantly higher</u> for the 45-64 population than for the population as a whole	<ul style="list-style-type: none">• <u>Significantly lower</u> for the ‘working’ population, compared to the ‘inactive’ or ‘unemployed’ population• <u>Significantly higher</u> for the ‘disabled’ population, compared to the ‘not disabled’ population• <u>Significantly higher</u> for the 50-64 population and significantly lower for the 30-44 population than for the population as a whole	<ul style="list-style-type: none">• <u>Significantly lower</u> for the ‘working’ population, compared to the ‘inactive’ or ‘unemployed’ population• <u>Significantly higher</u> for females than males• <u>Significantly higher</u> for the 45-59 population and <u>significantly lower</u> for the 65+ population than for the population as a whole	<ul style="list-style-type: none">• <u>Significantly lower</u> for people who were working, compared to people who were inactive or unemployed• <u>Significantly lower</u> for males than females• <u>Significantly higher</u> for the 45-59 population and significantly lower for the 65+ population than for the population as a whole



Where are we now? Progress Update

Making a Difference – Successes so Far

Increase mental health care capacity in primary care, accessible across people's lifespan
(Priority 4, Action 16)



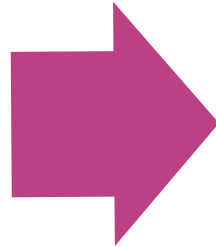
The Enhanced Primary Care Physical Health Hub is now fully integrated into the system – 80% of people on the SMI register are now routinely accessing health checks and have action plans in place, reducing the risk of admissions due to undetected health needs. This is being expanded to young people and adults with an autism diagnosis. The team has also been expanded to include health facilitators which support people to develop their self-care skills and attend outpatient or follow up appointments.



Where are we now? Progress Update

Making a Difference – Successes so Far

Pre-frailty social isolation and loneliness project (A Future You- ACTS and Vision and Hearing Support project to identify people who are pre-frail and at risk of loneliness and social isolation to reduce the risks. (Priority 1, Action 2)



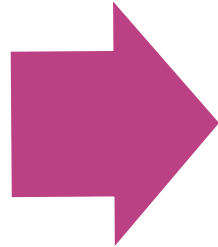
A Future You – Positive Planning for Healthy Ageing was funded by the ICS until March 2023. The external evaluation (by Sunderland University) highlighted the benefits of engaging with A Future You for both residents and staff members. People had both objective and subjective increased wellbeing following their involvement and case studies highlighted increased social connections, independence, empowerment, and happiness and positivity for residents who engaged. Staff members reported a sense of fulfilment and enjoyment from working on the project. Additionally, by advertising projects such as A Future You, people were able to access support from services that they otherwise wouldn't have heard of or realised were available to them.



Where are we now? Progress Update

Work in Progress

Consistent and universal system-wide training offer for front-line staff and voluntary sector organisations, e.g, psychological first, coping with suicide, etc. (Priority 4, Action 13)



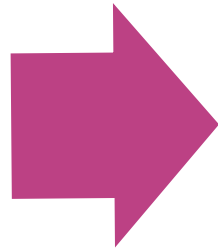
The Mental Health Training Offer will be refreshed and reviewed to form part of a new A Better U training offer led by First Contact Clinical with Washington and North Tyneside Mind as key delivery partners. First Contact Clinical are working with Mind to ensure their courses, promo materials and websites are in alignment with the A Better U band. A range of delivery options are being worked on, from face-to-face, virtual/web-based delivery as well as e-learning and podcast based bitesize information sessions and downloads suited to a range of learning styles for staff, volunteers and local residents/health champions.



Where are we now? Progress Update

Work in Progress

Map hyper local/neighbourhood based VCSE services across the borough with a view to check coverage/gaps in geography or cohorts and to understand whether the services provided are accessed by local populations (Priority 2, Action 5)



Work is ongoing with the first cohort of organisations to get set up on 'Time to Spare'. This is a new portal for all VCSE organisations in the Borough to promote their services and activities, to host volunteers and for anyone to search for activities/services/volunteer opportunities. Data generated from the platform will be really insightful, providing a view of who is using what service.



Where are we now? Progress Update

Requested Actions from Board Members

- Board Members are requested to note and endorse the additional proposed interventions and activities detailed in the Action Plan

