

A Strategy for the Health and Wellbeing of Hampshire 2019–2024

Revised Draft: March 2019

Foreword

It is my pleasure to introduce this Strategy for the Health and Wellbeing of Hampshire, on behalf of the Hampshire Health and Wellbeing Board. As a Board, we are all deeply committed to the work that we and our organisations do to improve the health and wellbeing of the people we serve. We all want Hampshire residents to live long, healthy and happy lives with the greatest possible independence.

Hampshire is a great place and generally our population is healthy with good life expectancy. However, outcomes are not as good for some people as they could be. A key feature of this strategy is our ambition to continue to narrow the gap between those with the best and worst health and wellbeing. This means paying attention to the wider determinants of health, such as housing, education, employment, community safety, and the physical environment just as much as we do to traditional health and care services.

This second Strategy contains many of the themes that appeared in our first Strategy. However, I welcome the increased emphasis we intend to place on prevention and on mental health issues. I am also very supportive of the intention to look right across the life course, through the introduction of a new theme, which we are calling 'Dying Well'. This new theme is about living well to the end of life, at whatever age this occurs.

We are publishing this Strategy at a time of great change at national and local level and as a Board we will have to adapt our approach and activities to respond to new developments as they occur. We have tried to align our high-level plans with the recently published NHS Long Term Plan and are aware of Government Green Papers expected in the coming months, on Prevention and on Adult Social Care which will also be highly relevant to the work of the Health and Wellbeing Board.

I would like to thank those individuals and organisations who took the time to read our draft Strategy and who gave us feedback. Inevitably, there were a range of different comments on the content and the way we have presented the issues. As a Board, we have tried to carefully consider and balance the feedback we received, and we have taken an evidence-led approach to deciding the final content.

Councillor Liz Fairhurst

**Chairman of the Hampshire Health and Wellbeing Board
and Executive Member for Adult Social Care and Health at Hampshire County Council**

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Introduction

Hampshire's Health and Wellbeing Board brings together partners from local government, the NHS, other public services, and the voluntary and community sector. The Board aims to ensure that organisations plan and work together to improve the health and wellbeing of Hampshire residents. It is only by working together that we¹ can make a big difference to outcomes for all our residents.

This Strategy document sets out the Board's vision and key priorities for the next five years. It looks at long-term goals and key priorities for improvement across a number of themes. We have started to develop the content of a draft business plan setting out delivery priorities for the first year of the new Strategy in 2019/2020, with performance measures. The business plan will be separately agreed by the Board each year following agreement of the Strategy itself.

Our vision

The Health and Wellbeing Board's vision is to enable people in Hampshire to live long, healthy and happy lives, with the greatest possible independence. We want to tackle health inequalities – narrowing the gap in life expectancy and improving healthy life expectancy. In simple terms, we want to ensure that those living longer are also healthier for longer. Making best use of the limited resources we have, we want to improve outcomes and resilience for people of all ages. We want children to have the best possible start in life. We also want people to have choice, control and dignity at all stages of life, including at the end of life.

We will do this by:

- Promoting wellbeing and preventing ill health
- Focusing on reducing the significant difference between those with the best and worst health in Hampshire
- Aiming to create an environment that makes it easier for people to take responsibility for their own health and wellbeing
- Continuing to prioritise the safeguarding of children and vulnerable adults, since feeling safe is an essential starting point for people's wellbeing
- Improving services so they deliver good, accessible and joined-up care
- Using engagement and coproduction approaches, local networks, knowledge and partnerships to ensure services and activities are joined up and respond to what communities need
- Working with partners to deliver the Strategy, including collaborating with neighbouring Health and Wellbeing Board areas so that we align our activities or take a shared approach where this makes sense
- Putting together a plan each year, with milestones, to communicate what areas the Health and Wellbeing Board will focus on to help deliver this Strategy

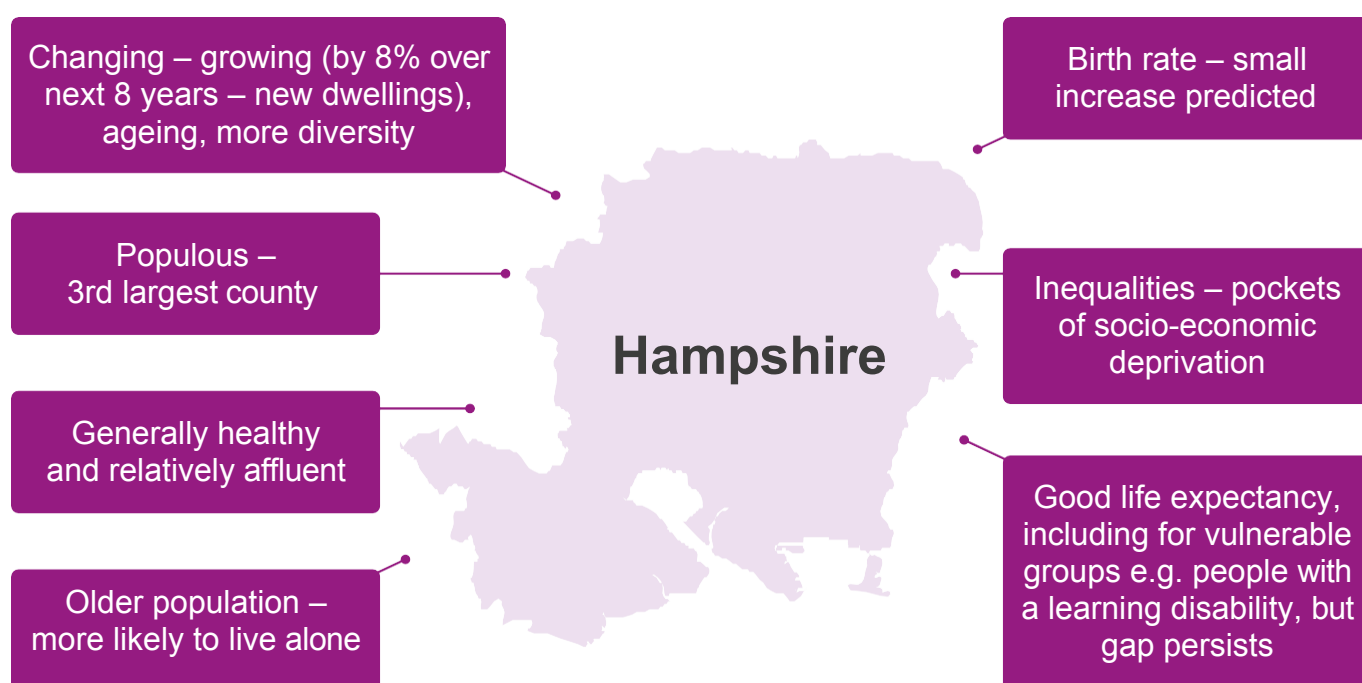
¹ References to 'we' in this Strategy refer to the members of the **Hampshire Health and Wellbeing Board**

What do we already know?

Hampshire's [Joint Strategic Needs Assessment](#) (JSNA) is the primary source of information, as it looks at the current and future health and wellbeing needs within our Hampshire population. The priorities and challenges covered in this Strategy are informed by the JSNA.

As outlined in the JSNA, overall Hampshire is a prosperous county. However, there are health inequalities between areas. Parts of Eastleigh, New Forest, Test Valley, Havant, Rushmoor and Gosport rank among the most deprived 20% of areas in England. The population is changing, getting older and becoming more diverse. The proportion of the population who are 85 years and over is expected to increase by almost 30% by 2023.

In Hampshire, life expectancy at birth for both men and women is better than the England average and is increasing. However, there is a gap between life expectancy and healthy life expectancy. Men spend 14 years and women spend 16 years of their life in poor health.



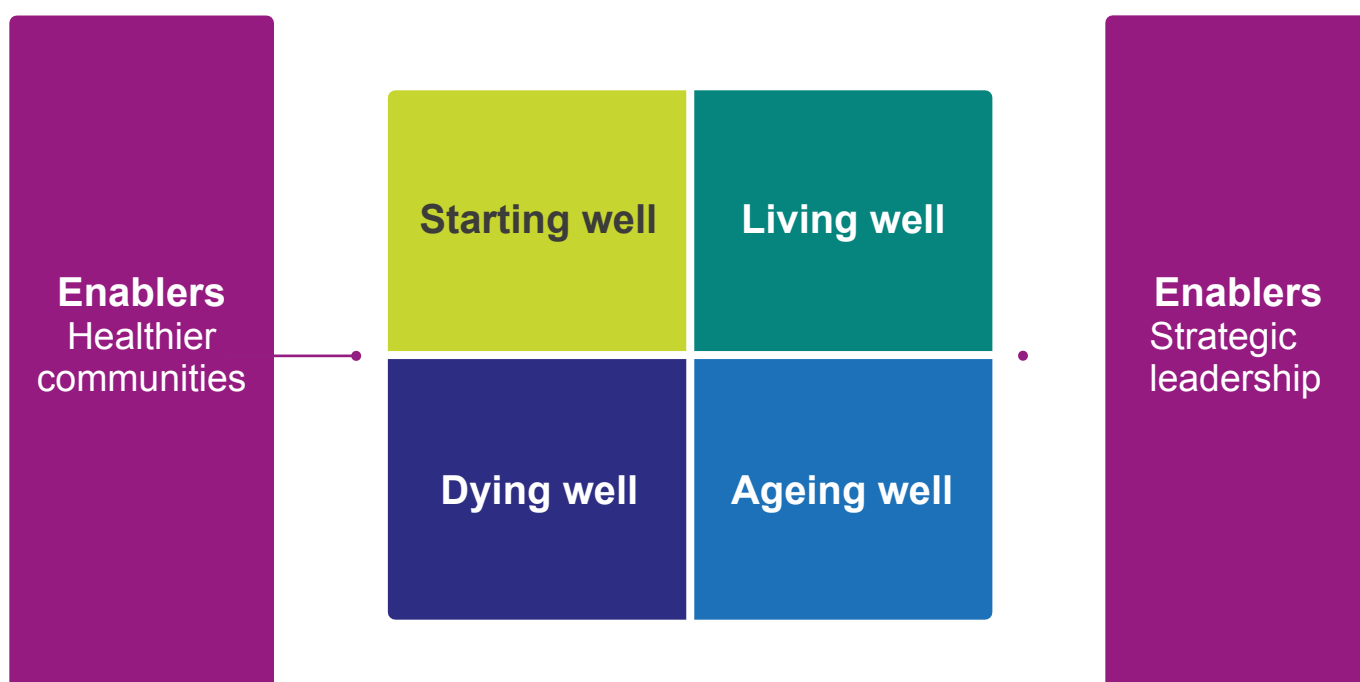
A second source of information that underpins the priorities and activities described in the Strategy is feedback from residents and users of services. Organisations involved in the Health and Wellbeing Board regularly carry out consultation, engagement and coproduction to develop and improve services. This feedback has been incorporated into the priorities and suggested areas of activity.

A third source of information and intelligence comes from the Board members and individuals in partner organisations who have helped to shape the Strategy through workshops and discussions and contributed towards the drafting process.

The Health and Wellbeing Board's first Strategy, published in 2013, involved significant public engagement as the Board was new and needed to understand the views and ambitions of Hampshire residents to set the direction for its work. For this second Strategy, the Board aims to build on the good work that has already taken place.

We have identified four key priority areas, in addition to two 'enabling' priority areas which span the whole Strategy. Prioritising prevention and tackling inequalities will also be golden threads running through all areas of the Strategy.

[Note for designer: please can you show 'Prevention' and 'Tackling inequalities' as themes that run across all elements of this diagram?]



We are looking at new ways of implementing and monitoring this new Strategy. We want to make sure it stays fit for purpose over its five-year duration. To help make this happen, the Board is keen to have a much more focused business plan for each year of the Strategy, so that Board members and the public can see what key activities the Board intends to do, monitor and observe each year. The Board will also measure its success using a number of performance indicators to review progress in each of the priority areas in the Strategy.

Starting well

How are we doing in Hampshire?

There are just over 322,000 children and young people in Hampshire aged 0–19. This represents 21% of the county’s population. The number of 0–19s is projected to increase by 4.8% in the next 5 years.

Generally Hampshire’s children have good health and good life chances. They are more likely to attend school regularly and be immunised against infectious diseases. The main causes of concern are increasing obesity, emotional wellbeing and mental health, educational attainment in disadvantaged groups, including those children with Special Educational Needs and Disabilities (SEND) and insufficient levels of physical activity.



Where do we want to be in five years’ time?

We want to improve the health, happiness and achievement of children and young people, including those who are vulnerable or disadvantaged, such as children with special educational needs or disabilities or looked after children. We will do this by working to reduce inequalities and improving outcomes through greater collaboration. We are committed to early help for children, young people and their families, identifying as early as possible whether a child or family need support, helping them to access services, and working together to ensure this has maximum impact. We will develop service models with service users, children and young people, using family-centred and strength-based approaches, not a deficit-based approach. We will ‘Think Family’ so that we work in a holistic way that does not just focus on a child or young person in isolation.

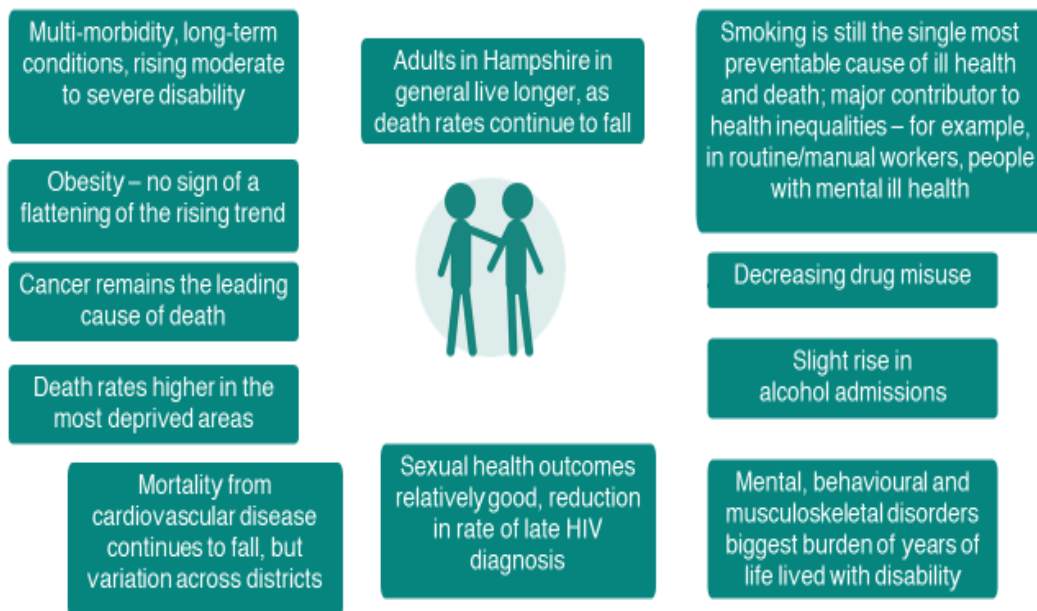
Key priorities for improvement

- Improve mental health and emotional resilience for children and young people and their families. This will prioritise prevention and earlier intervention, for example through more support in schools and the wider community, to improve mental health at an earlier stage. There will be a particular focus on vulnerable groups, including Adverse Childhood Events, the mental health of parents including perinatal mental health, and emotional resilience in educational settings.
- Improve physical health in children and young people through prevention and early intervention. This will prioritise healthy weights, physical activity and reducing smoking in pregnancy.
- Work more collaboratively across organisations, disciplines and with children and young people and their families to improve outcomes and services, including integrated or aligned approaches where appropriate.

Living well

How are we doing in Hampshire?

There are just over 1.07 million adults aged 18 and over in Hampshire. This represents 79% of the total population. Hampshire has an older population compared to England with a higher proportion of the population aged 45 years and over and fewer young working aged people (aged 20–39). The proportion of residents with a limiting long-term illness or disability is comparable to England. However, the size of the Hampshire population means that the absolute numbers of people experiencing ill health or disability are large.



Where do we want to be in five years' time?

We want to reduce preventable ill-health. We will do this through concerted action on the risk factors we know contribute most to disease. We want to accelerate the reductions in people smoking, especially in our more deprived communities. We want to have a clear understanding of mental wellbeing in our communities and how we can influence it. We want to maximise the life opportunities of people living with health conditions and disabilities. We will encourage self-help and self-management for long-term conditions.

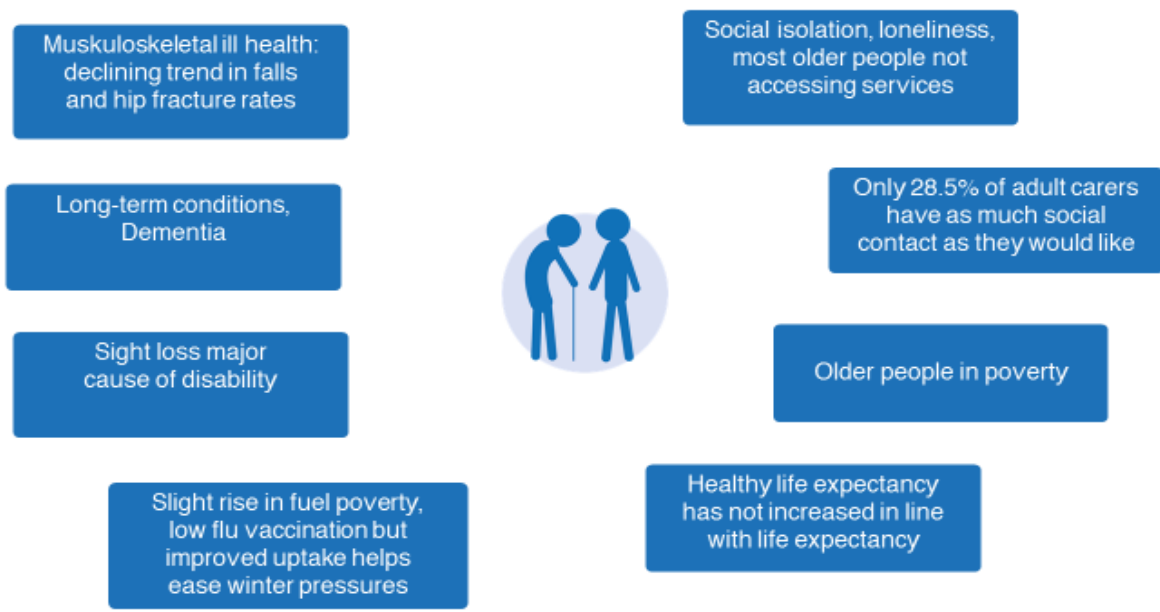
Key priorities for improvement

- Work together to enable people to live healthier lives focusing on the main lifestyle risk factors for cancer, circulatory disease and long-term conditions. We will start with smoking, obesity and physical inactivity.
- Improve population level mental wellbeing and reduce mental ill-health.
- Enable people with long-term conditions to live healthier lives for longer and reduce variation in outcomes.

Ageing well

How are we doing in Hampshire?

Across Hampshire, just over 1 in 5 people are 65 years and over compared to nearly 1 in 6 nationally. The population of people over 65 in Hampshire is projected to increase to over 333,000 people by 2023. People in Hampshire are enjoying longer lives than ever before, but not all these extra years are lived in good health. Long-term conditions, dementia, musculoskeletal problems and social isolation are more common in older age and can significantly affect the wellbeing of our older population.



Where do we want to be in five years' time?

We want residents to be able to live their later years in a way that helps them to feel healthy, connected and purposeful. This means living in places that enable social connections, offering opportunities to take part in meaningful activity and being surrounded by people who offer support and value the contribution of older people.

Key priorities for improvement

- Continue to develop connected communities which can support people to live happy, healthy lives in the place of their choosing.

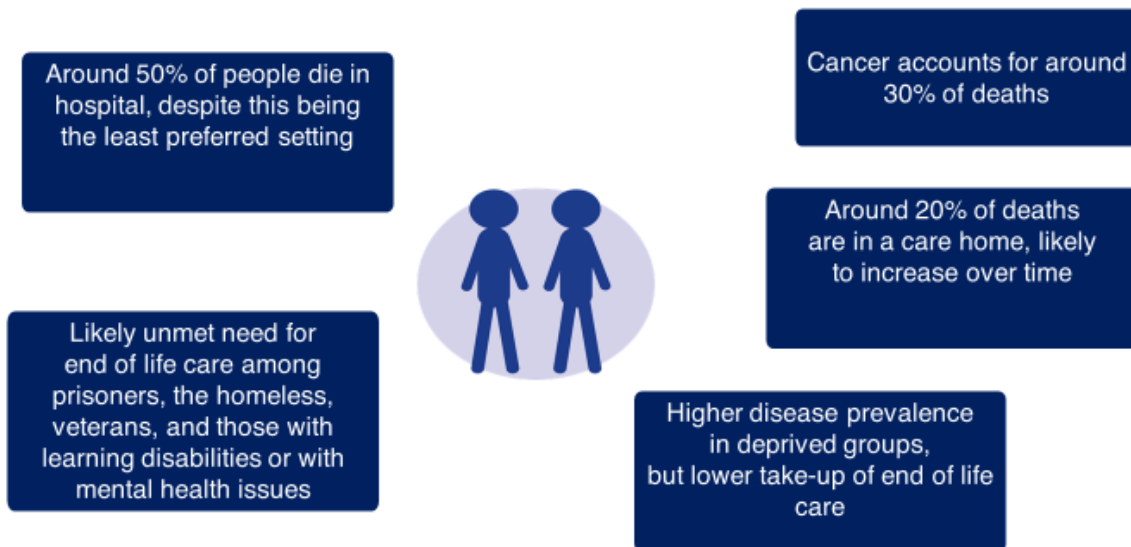
- Enable people to plan for a fulfilling, purposeful older age.
- Create healthy home environments which allow people to stay well and independent into older age.
- Enable older people to lead healthy, active lives.

Dying well

How are we doing in Hampshire?

During 2017, 12,973 residents of Hampshire died. One third of deaths were due to cancer. 27% of all deaths were premature (under 75 years): almost half of these were due to cancer and nearly one fifth were circulatory diseases. Almost 10% of all deaths had mental and behavioural disorders as the underlying cause of death, the huge majority of which were from dementia. Amongst other long-term conditions, dementia is an important chronic condition for which palliative care is needed because unlike other long-term conditions there is a shorter window of opportunity to have meaningful conversations with people about their wishes for the end of their life.

Whilst child deaths are rare, in Hampshire 92 child deaths were notified to the Child Death Overview Panel in 2017/18. Over two-thirds (67%) of child deaths reviewed in Hampshire were of children under the age of one.



Where do we want to be in five years' time?

We want to move to a situation where people of all ages have a good life up to the end of their life, supported to live well with life-limiting conditions. Individuals and their carers will have timely, honest and well informed conversations about dying, death and bereavement. Their preferences and wishes will be known and recorded in advance to ensure clear communication with all involved in providing care and support at end of life. Parents, family, friends and other loved ones will be supported with preparing for loss, grief, bereavement and potential loneliness. This support will continue after the death of the person. More people will be enabled to die well in a place of their choosing, receiving equitable end of life/palliative care irrespective of their primary diagnosis.

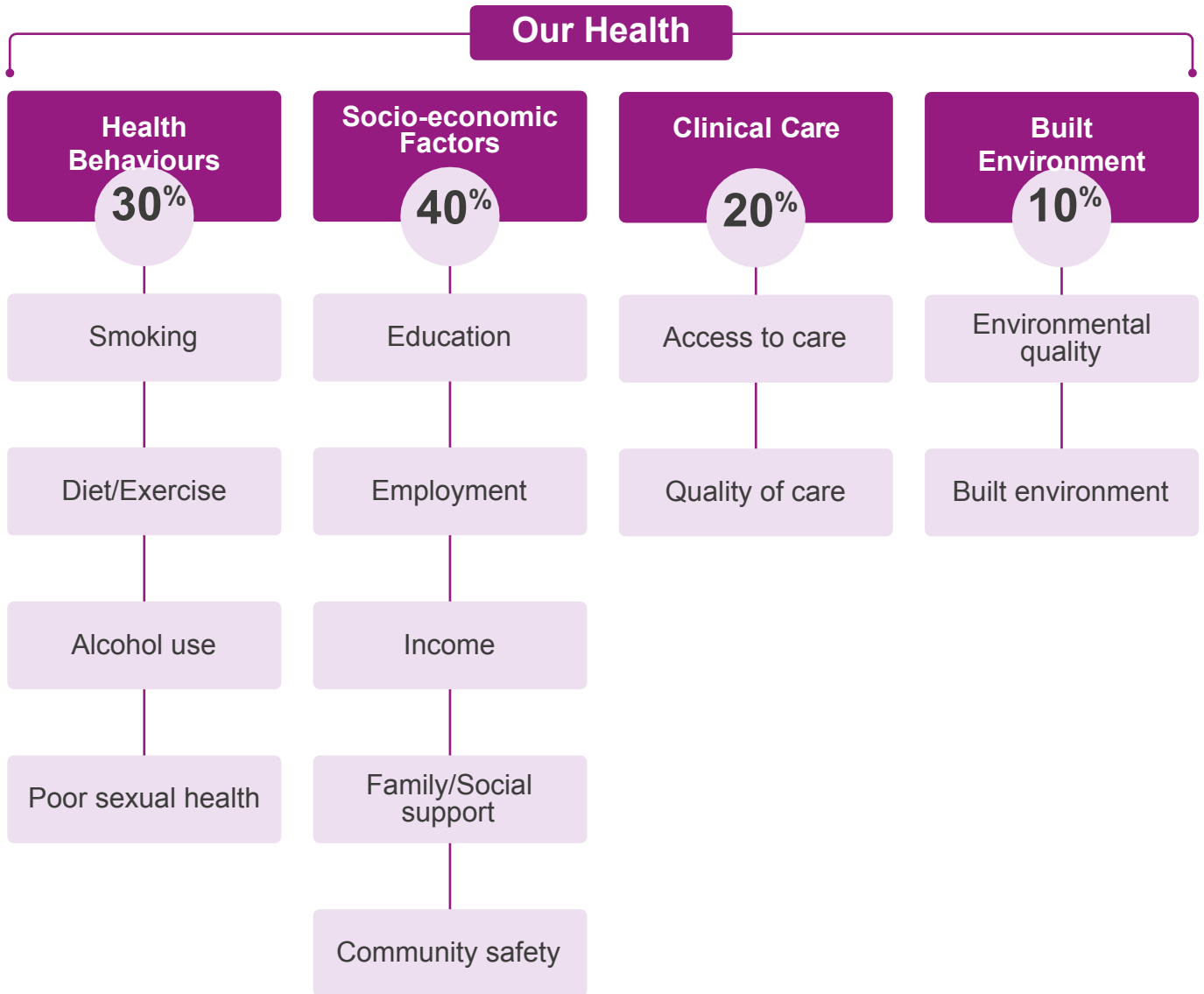
Care will be well integrated and coordinated, between the NHS, specialist palliative care, hospice services, social care and the voluntary sector. There will be transparency about the role each organisation plays so that it is clear to everyone, including the person at end of life, their family and support networks.

Key priorities for improvement

- Ensure person-centred care, choice and control is consistently in place across Hampshire to help live well with life-limiting conditions.
- Make available care workers and nursing staff 24 hours a day, to support people at end of life to return to or remain in their preferred setting in the last days and hours of life.
- Improve skills and capacity across Hampshire to ensure people are encouraged and supported to have early and timely conversations about end of life wishes and choices. This will help individuals and their families to plan and prepare in advance.
- Work together effectively across organisations to provide well integrated care and consistent palliative care, building on a shared care plan irrespective of organisational or funding boundaries.
- Improve access to bereavement support and services locally, for all age groups, especially for parents, families and educational communities following the death of a child, for children experiencing the loss of a parent, and for long-term carers who may also need support when their caring role ceases.

Healthier communities

Many factors contribute to our health and wellbeing and only about half of these factors are 'health related'. The type of housing and neighbourhood we live in, how connected we are with family, friends and our local community, how much money we have, whether we have a job, the lifestyle we follow, and whether we can access transport, leisure and other facilities all play a part.



To achieve the ambitions in this Strategy to improve the health of the whole population, and particularly to address health inequalities and the prevention agenda, we recognise that all partners will need to work together to address wider social and economic determinants of health, starting by:

- Making sure that health and wellbeing priorities are reflected in all local policies
- Supporting communities to be strong and connected to reduce loneliness and isolation

- Ensuring neighbourhoods are well designed to help people make healthy choices
- Advocating for more affordable and well-designed housing that can meet individuals' varying needs; promoting accessible design in housing; tackling homelessness
- Education and skill development from early years through schools and into adulthood
- Tackling poverty where possible, and helping people to access jobs
- Promoting sustainable, accessible transport and active travel
- Improving access to green spaces (such as parks and other open spaces), blue spaces (such as canals, ponds, rivers and beaches) and other leisure facilities
- Reducing impact on the environment
- Improving air quality

The County Council, district and borough councils and the community and voluntary sector are well placed to influence the above factors but NHS partners also have a central role to play.

Local level organisations are particularly well placed to identify trigger points for crisis and to implement interventions that divert or prevent people's needs from escalating. They also have invaluable knowledge that can be better utilised to inform commissioning. There is a recognition however that resources are diminishing, so we need to join up support and target resources better, seeking to reduce duplication of effort and spend.

Strategic leadership – how we can join up the system better across Hampshire

Hampshire is a large county, with a complex range of services in the public, private, voluntary and community sectors. A crucial part of the Health and Wellbeing Board's role is to join up the system better, adding value to the collective delivery arrangements of all the different organisations involved in health and wellbeing.

We want to see transformational improvement across the whole system, so that wherever you live in Hampshire, you can expect consistent outcomes when you interact with services and organisations that support health and wellbeing.

The Board will use a population health approach to inform this work, and over the next five years will oversee a number of 'enabling' workstreams to help join up and improve the health and wellbeing of the population. Progress on these workstreams will be reported regularly to the Board. These key enablers are listed below:

1 Deliver care closer to home

Outcome:

To support people at the right time, in the right place, and with the right services, so that fewer people are unnecessarily admitted to hospital or delayed there once they are ready to leave, and they can access suitable services after being in hospital to help them recover.

2 Harness the potential of digital solutions

Outcome:

To give people the opportunity to take control of their information and to enable organisations to work together better to deliver seamless care

3 Support a sustainable workforce of paid staff and support unpaid carers and volunteers

Outcome:

To create the conditions where individuals receive sufficient support from the right people – whether paid or unpaid – who have the knowledge, training and motivation required for their roles

4 Consistent and accessible information and advice

Outcome:

To enable people to take control and access the information they need

5

Improve health and wellbeing for people in organisations on the Health and Wellbeing Board

Outcome:

People in our organisations feel supported to be healthy and can help others

6

Make better shared use of our buildings and community resources

Outcome:

We use our reducing resources wisely to provide joined-up services that are easy to access

Alternative formats and further information

To request a copy of this Strategy in another format such as large print, audio or Braille, or for any queries about the Board's work, please contact Hampshire's Health and Wellbeing Board at: hampshirehwb@hants.gov.uk

Appendix: Outline priorities for the Board in 2019/2020

Starting well

Where will we start in 2019/2020?

The Year 1 business plan will deliver progress on all three priorities:

□ Mental health and emotional resilience

- Begin the implementation of an Emotional Wellbeing and Mental Health Strategy for Hampshire, making the most of developments in the NHS Long Term Plan and Local Transformation Plan
- Start to co-design a wider mental health service model ahead of procurement in 2021/2022
- Ensure women can access perinatal mental health services at the appropriate level in accessible environments in a timely way
- Agree a system approach to supporting children and young people who have had Adverse Childhood Events under the leadership of the Police

□ Improved physical health

- Continue to deliver Hampshire's childhood obesity action plan
- Continue to implement Hampshire's strategy to reduce smoking in pregnancy and increase partnership working across the system to begin to see the impact

□ Working together

- Work with partners and use the re-procurement of Public Health nursing services to have an increased focus on vulnerable families, making better use of digital solutions and ensuring service users and frontline staff have more input into the design of services
- Develop an integrated community service for children with complex needs through a CCG-led procurement which aligns with Public Health nursing
- Develop consistent messages across different workforces and support workforce development, leading to an increase in knowledge, skills and confidence of staff
- Develop multidisciplinary working and teams to safeguard and protect vulnerable children under the Transforming Care programme with support from system partners
- Ensure there is good engagement and co-design with children, young people and their families

How will we measure our progress?

We will put together a small number of performance measures that we can monitor over the five years of the Strategy. These will be underpinned by a Children and Young People's Integration Outcomes Framework and a shift towards outcome-based commissioning while we move away from process-based commissioning.

Some potential examples of performance measures for 'Starting Well':

- Improved school readiness: the percentage of children with free school meal status achieving a good level of development at the end of Reception
- Reduction in hospital admissions as a result of self harm in 15–19 year olds
- Reduction in waiting list and times for CAMHS during the lifetime of this strategy
- Improvement in self reported emotional resilience in school surveys during the lifetime of this strategy
- Reduction in prevalence of smoking in pregnancy
- Stabilisation of rates of overweight and obesity in Reception and Year 6 (at school) during the lifetime of this strategy
- Improvement in self-reported physical activity in school surveys

Living well

Where will we start in 2019/2020?

The Year 1 business plan will deliver progress on all three priorities:

Enable people to live healthier lives

- Scale up our approaches to addressing lifestyle risk factors, using evidence-based behaviour change approaches
- System wide action with targeted interventions to stop people starting to smoke and to help smokers to quit
- Align with community enablers to tackle the wider causes of obesity, and ensure we make every contact count
- Implement the Hampshire Physical Activity Strategy across our organisations

Improve population level mental wellbeing and reduce mental ill-health

- Take a community approach to resilience, supporting the 'Five Ways to Wellbeing' initiative

- Support a Zero approach to suicides within organisations and the whole population
- Take a system wide approach to self harm prevention
- Increase focus on improving the physical health of people with serious mental illness across our organisations and helping people into work

Enable people with long-term conditions to live healthier lives for longer and reduce variation in outcomes

- Develop clear plans with the Sustainability and Transformation Partnership (STP) to address variation in outcomes for people with long-term conditions
- Use the emerging population health management approach to work with primary care groups serving neighbourhoods to identify local priorities
- Commission and learn from initiatives to enable people to improve their self management and provide peer support for long-term conditions
- Mental Health Resilience programmes are being developed and enhanced in Wellbeing Centres across Hampshire
- Take action to address the gap in acute hospital investment in addressing the mental health needs of inpatients to support physical health recovery

How will we measure our progress?

We will put together a small number of performance measures that we can monitor over the five years of the Strategy. Some potential examples for 'Living Well':

- Proportion of the adult population who are current smokers, including those in lower socio-economic groups
- Proportion of the adult population with excess weight
- Proportion of the adult population who are physically inactive
- Proportion of the adult population who have a current diagnosis of anxiety/depression
- Suicide rate, with the aim of a reduction in suicide rates over the 5 years of the strategy
- Long-term condition management: Improvement in answer from the GP Patient Survey on support and confidence managing your own condition
- Improvement in clinical outcomes for selected long-term conditions

Ageing well

Where will we start in 2019/2020?

The Year 1 business plan will deliver progress on the priorities:

- Conduct a healthy homes needs assessment to understand what more we can do to help people stay well and independent at home for longer
- Develop joined up social prescribing and connector models across health and social care to provide support for people who need help outside formal services
- Encourage volunteering opportunities for people who feel lonely
- Upscale opportunities for strength and balance exercise for people over 50
- Continue the implementation of dementia friendly places and upskilling the workforce to better support the needs of people with dementia, building on existing good practice

How will we measure our progress?

We will put together a small number of performance measures that we can monitor over the five years of the Strategy. Some potential examples for 'Ageing Well':

- Healthy life expectancy at age 65 years
- Gap in life expectancy between people living in the most and least deprived areas
- Emergency admissions due to falls in people aged 65 and over
- Hip fractures in people aged 65 and over
- Social isolation:
 - percentage of adult social care service users who have as much social contact as they would like
 - percentage of adult carers who have as much social contact as they would like
- Reduction in delayed transfers of care (ie when a patient is ready for discharge but is still occupying a hospital bed)

Dying well

Where will we start in 2019/2020?

The Year 1 business plan will deliver progress on the four priorities:

- Establish a steering/reference group at Health and Wellbeing Board level to:
 - lead a review of priorities and measures
 - define and drive activity to implement the revised priorities;
 - ensure that there is engagement with people to understand a range of experiences and to co-design any new approaches; and
 - ensure all activity locally/nationally is shared consistently across the system
- Ensure that a systematic approach is taken to identification and consistent implementation of relevant tools and pathways across Hampshire, such as The Recovery Package (which supports people to self-manage the impact of cancer on their life), and End of Life Care tools such as the Gold Standards Framework, Six Steps Programme and the ReSPECT tool
- Work together to ensure a systematic identification of people who are on an end of life pathway
- Work together on a systematic instigation of key conversations and recording of wishes, enabling open two-way conversation between the individual, family and all the relevant health and care professionals and providers of end of life support
- Review access to bereavement support and services to identify potential opportunities to improve availability across the county, to support carers and families
- Ensure this work involves engagement with people to understand a range of experiences and can include co-design of any new approaches

How will we measure our progress?

We will put together a small number of performance measures that we can monitor over the five years of the Strategy. Some potential examples for 'Dying Well':

- Proportion of people dying in the place of their choosing
- Number/proportion of people on the GP palliative care register
- Access to NHS Continuing Health Care fast track

Healthier communities

Engagement with district and borough councils has suggested the following potential priority areas for 2019/2020:

□ **Health in all Policies approach:**

- work together to devise a mechanism to make sure that health and wellbeing priorities are reflected in all local and countywide policies

□ **Family, friends and community:**

- supporting communities to be more resilient, building social networks and reducing loneliness and isolation;
- increasing awareness of accessible services and support that is available locally, linking in with the County Council's place-based demand management and prevention programme which will be working in each Hampshire district area to meet specific local needs. For example, social opportunities for people with disabilities and multi-agency drop-in sessions for veterans

□ **Housing:**

- earlier referral and prevention of homelessness by consistently embedding the Duty to Refer and cooperative working in all relevant organisations (not just housing teams) so that Local Authority Housing service assistance is sought as early as possible and a 'team around the person' approach can be initiated for complex cases;
- helping people access affordable housing, eg through planning policies overseeing that new build sites comprise adequate affordable housing;
- helping vulnerable people to take on, and maintain, tenancies, including more people with physical and learning disabilities

□ **Built and natural environment:**

- ensuring new developments are designed with health and wellbeing in mind;
- ensuring access to green spaces;
- facilitating active travel and physical activity, eg through accessible leisure facilities and opportunities

In order to create the 2019/2020 business plan, the Health and Wellbeing Board will continue its engagement with district and borough councils and the voluntary and community sector to agree shared priorities and what support organisations want from the Health and Wellbeing Board. This will include looking at how services can be commissioned at both county and local level to maximise social value, economic and environmental benefits.

Strategic leadership – how we can join up the system better across Hampshire

Key areas of focus for 2019/2020 are outlined below.

1 Deliver care closer to home

- Delivery of the Patient Flow and Onward Care programme
- Universal adoption of the 'New Care Models', which bring together local health, care, council, and voluntary services and communities to focus on the needs, priorities and assets of people in NHS 'cluster' localities, including work around prevention and self-care
- Demand Management and Prevention programme, which includes developing connector services to ensure a more consistent county-wide service; working with communities and voluntary organisations in a place-based way to increase resilience; community-based support services providing opportunities for people to continue to live at home through, for example, exercise classes, social networks, Good Neighbours groups, affordable warmth services and Meals on Wheels.
- Integrated intermediate care, to facilitate care in the most suitable setting for people, wherever possible in their own home

2 Harness the potential of digital solutions

- Promote Technology Enabled Care (TEC) as a first line of support for residents and carers and a central plank in the delivery of care services, as well as offering TEC to a wider set of authorities and organisations
- Continue to develop Hampshire-wide IT systems, such as the Care and Health Information Exchange (CHIE) and Care and Health Information Analytics (CHIA), to facilitate greater sharing of records and use of analytical information to better understand the needs of residents
- Link up different organisations' IT systems so services can work together better across Hampshire, and take forward appropriate data sharing with voluntary and community sector organisations where required, as they will not be able to access public sector IT systems

3 Support a sustainable workforce of paid staff and support unpaid carers and volunteers

- Implement the Hampshire Joint Carers' Strategy 2018–2023

- Work together to increase volunteer numbers

4 Consistent and accessible information and advice

- Make **Connect to Support Hampshire** the 'go to' website for:
 - anyone looking for care and support information and advice in Hampshire
 - statutory and voluntary organisations as their primary resource for signposting, linking in with development of more consistent connector/signposting services www.ConnectToSupportHampshire.org.uk
- Ensure other sources of information and advice are promoted and linked into Connect to Support Hampshire, for example, the [Family Information and Services Hub](#), which includes the [Hampshire Local Offer](#) (services and information for children and young people with special educational needs and disabilities)

5 Improve health and wellbeing for people in organisations on the Health and Wellbeing Board

- Ensure healthy eating options are provided and accessed at Hampshire County Council and other catered premises and share the learning with public sector and commercial providers
- Improve physical and mental health in schools and colleges (through healthy schools initiatives)
- Build awareness across all public sector staff and the voluntary sector to have healthy conversations and to make every contact count

6 Make better shared use of our buildings and community resources

- Continue to identify better ways to use public sector land and buildings to increase their efficiency, support collaboration and provide multipurpose community hubs