



South West London

Health & Care
Partnership

Kingston Health and Care Plan

Refreshed following the pandemic

Start well | **Live well** | **Age well**

- Recognising all carers
- Tackling inequalities in health to reduce disparities for those most disadvantaged (especially in light of the COVID-19 pandemic)
- Tackling obesity
- Promoting the mental health and resilience of residents to improve health and wellbeing during their whole lives

Kingston

This plan has been developed with the aim of making sure that Kingston residents start life well as children, live well as adults and age well for longer. No single organisation could achieve this alone. Our local NHS organisations, the council and voluntary and community services will continue to work together towards these goals in partnership with our communities. This is a refreshed plan of action, following the global COVID-19 pandemic. To help us with this aim, four priority themes or 'golden threads' (for all ages) have been identified by the

borough's Health and Wellbeing Board and Kingston's local system leaders as priority to focus on over the next two years:

- 1) Recognising all carers
- 2) Tackling inequalities in health to reduce disparities for those most disadvantaged (especially in light of the COVID-19 pandemic)
- 3) Tackling obesity
- 4) Promoting the mental health and resilience of residents to improve health and wellbeing during their whole lives



There were **177,502** people living in the borough in 2021 (226,761 registered with Kingston GP practices)



One-third of residents are from Black, Asian and Minority Ethnic backgrounds

13,288 carers provide care for people with physical and mental disorders, mostly in their own homes and of these, **2,346** provide care for over 50 hours a week

Health disparities exist within the borough, with residents in the most deprived areas having an average life expectancy at birth **six years shorter** than those in less deprived parts

Leading causes of death amongst those aged under 75 years were:

Cancer (46%)

Diseases of the circulatory system (24%)

external causes (accidents, misadventure, suicide) (11%)



Up to the end of September 2021, almost **20,000** residents had tested positive for COVID-19, and over 300 had died within 28 days of a positive COVID-19 test



High blood pressure (hypertension), depression, obesity, diabetes and **asthma** were the most commonly diagnosed conditions among people registered with Kingston GPs (in 2019-20)



Childhood obesity rates (from 2017-20) are

70% higher

in the more deprived parts of the borough on starting school, with an even larger gap in secondary education.



In Year 6 (10-11 year olds) there are an estimated **230** obese children in Kingston (2019-20)

Our vision

“We want people of all ages to remain as healthy as they can for as long as they can. We are focused on working together on prevention, tackling inequalities in health and enabling greater involvement of the community and voluntary sector to help people to be connected to their community, to look after themselves and, if and when required, to receive quality joined-up care.”



Start well

What happens in early life affects your health and wellbeing as you get older. We want to make sure that all children in Kingston have a good start to life and the right support to thrive and fulfil their potential.



Live well

The health and wellbeing of our working-age population impacts not just individuals, but also families, children, workplaces and communities. We will promote good health in adulthood, with the ambition of preventing the development of many long-term conditions and disabilities, enabling people to live in good health for longer.



Age well

We want to promote an ethos of ‘active, healthy ageing’. We know that within Kingston, people have different experiences of older age, with residents in some of our more deprived areas having both a shorter older age and less good health as they age. We will promote enjoyable physical activity and make sure preventable conditions are treated as early as possible as well as support social connection and independence for our older residents.



What we've achieved so far

This refresh of Kingston's Health & Care Plan is being made 18 months into the global COVID-19 pandemic which has greatly affected the borough and which is not yet over. Sadly, we have already lost one in every 600 residents and almost 20,000 residents have had a confirmed COVID-19 infection to date. Despite all of our best efforts, many people have missed routine medical care and treatment and there is increased pressure on the health system to catch up on this care.

However, despite the enormous challenges and impact on everyone in the borough, the people and organisations of Kingston have

risen to the challenge to protect residents' health and find new ways of doing things. Excellent partnership work has enabled us to reach some of our most vulnerable residents and meet many of the aims of the original 2019-2021 Health and Care Plan, despite the disruptions caused by the pandemic.

Many of these achievements were reported to Kingston's Health and Wellbeing Board in September 2021 and can be found [here](#).



Our plans

Start well



Mental health

With a national increase of mental disorders being diagnosed in 5 to 15 year olds and an increase in the number of referrals to Child and Adolescent Mental Health Services (CAMHS), we want to maximise the mental wellbeing and resilience of our children and young people. The COVID-19 pandemic has further increased the number of referrals to CAMHS locally with an increasing number of children presenting with more complex needs.



Obesity

Childhood obesity rates (from 2017-20) in children starting school are 70% higher in the more deprived parts of the borough, with an even larger gap in secondary schools. We will take action to tackle obesity in all ages, enabling children to be physically active with healthy lifestyles and a healthy weight to prevent ill-health and improve wellbeing.



Children with SEND

Children and young people with learning difficulties are among the most vulnerable in our community and can have a wide range of support and access needs. Many will have additional health conditions, including physical disabilities and sensory impairments. We want to give children and young people with special educational needs and disabilities (SEND) opportunities to flourish and be independent.

Live well



Physical and mental health

Health is influenced by many factors. These include some things, like age, gender and genetics, that can't be changed, but other factors that we can change play a key role. These include not smoking, alcohol intake, physical activity levels and social connections for ensuring good mental health. We will support people to have a healthy weight, regular physical activity and to be connected to the many offers available in the community.



Long-term conditions

Having one or more long-term conditions generally reduces quality of life and increases the chances of requiring support from health or social care services. Local health and care partners will continue working together in more integrated ways to support people with long-term conditions to manage their own conditions and improve the care they receive when they come into contact with health and care services.



Health inequalities

As a health and care system, we are moving beyond a focus on individual behaviour towards a wide range of social and environmental interventions to improve the health of the population and reduce preventable diseases. We are also taking a more proactive approach to certain health conditions, intervening earlier, preventing the serious consequences of these conditions. We will continue working to reduce health inequalities for adults with, or at risk of, having poorer health.

Age well



Integrated Health and Social Care

We want to maximise people's independence and resilience to enable them to live well at home where that is their choice. We want our residents to enjoy life in Kingston and be in the best health possible in older age. We will promote enjoyable physical activity, making the best use of the abundant green space, active travel opportunities and sport and social groups in the borough. We want to promote volunteering and social connection, including strong bonds between generations.



Loneliness and isolation

The pandemic has had a particular impact on the health of our older residents over the last 18 months. Further, many have faced a challenging time through isolation over the various 'lockdown' periods and difficulties in accessing healthcare. On a more positive note, many people have also embraced digital technology in new ways, including accessing health and wellbeing advice and social connections and we will support this further to reduce loneliness and isolation for everyone.



End of life

We will continue to strive for residents to have as good health as possible throughout their life and, at the end, aim for good end of life care, enabling a dignified, controlled and peaceful end to their life. We aim to support people approaching the end of their life to have control over how their last days are lived, and for them to be able to die with dignity.



How we will know if we have made a difference



Start Well

- An increase in pupils who state they are at least 'quite happy' with their lives as a whole
- Childhood obesity is tackled, rates of obesity in children going into reception (age 4 or 5) and those in Year 6 (age 10-11) do not rise and ideally reduce.
- The disparities between childhood obesity amongst the least and most deprived areas do not increase and ideally are reduced.
- Rates of admission to hospital for extraction of decayed teeth in children do not rise and ideally reduce.
- More children and young people with SEND are in mainstream schools and education settings with support from local health and care services.
- Children and young people who use local therapy services have shorter waiting times for assessment and therapy programmes.
- The identification of neurodevelopmental needs happens earlier, and assessments are completed within 12 weeks of referral.



Live Well

- An increase in the detection of people with long term conditions through health checks and national screening programmes.
- Screening services have been taken up by all eligible patient groups including those who are most at risk.
- An increased number of people at risk of long term conditions are accessing self-care prevention courses e.g. for diabetes.
- The number of people referred to lifestyles services and accessing weight management support will increase and their weight will reduce.
- A Mental Health Strategy and action plan are in place with the differences being monitored.
- There is an increase in the numbers of smokers with anxiety or depression who stop smoking.



Age Well

- People will be supported to live independently and in their own home for as long as they are able to, with a reduction in admission to care homes and an increase in admission avoidance.
- There will be a reduction in people who report feeling lonely and isolated.
- Older carers are included as a group at risk of isolation in loneliness and isolation plans and their needs are met.
- More older people will have access to support from bereavement services.
- Increase in the number of people with palliative and end of care needs identified and included on the palliative care register.
- Increase in the quality of care plans across organisations for end of life care.



What people have told us

- Extensive community engagement was carried out on the original plan in 2019. For this refreshed plan, recent surveys and reviews carried out during the pandemic response period have been used to inform action plans.



This is a summary of the Kingston Health and Care Plan, you can read the full document on our website.