# TORBAY JOINT HEALTH AND WELLBEING STRATEGY

# 2012/2013 - 2014/2015





South Devon and Torbay Clinical Commissioning Group CONSULTATION PROCESS Joint Health and Wellbeing Plan – Discussed at Health and Well Being Board

05.07.12

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### 1. VISION (INTO PRACTICE)

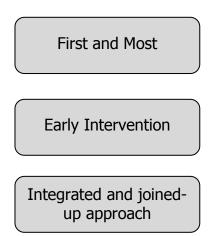
The vision of Torbay's Health and Wellbeing Board is:

# **A Healthier Torbay:** Where we work together to enable everyone to enjoy a healthy, safe and fulfilling life

To achieve this vision we have identified three outcomes to be delivered:



The strategy has been developed with three underlying principles:



Focusing attention and effort to address the health and wellbeing inequalities that exist between communities within the Torbay

Improving overall outcomes and ultimately reducing cost with a focus on prevention rather treatment

Joining up planning, commissioning and delivery at a local level

The Board will measure and check how well organisations deliver on the top priorities for Torbay and ensure the necessary implementation plans are in place.

On the following page the diagram captures our approach, including our 16 priorities to deliver these outcomes.

Key Supporting Strategy Documents	Priorities	Outcomes	Vision
Documents Documents	Promote the emotional wellbeing of children and young people Provide the full offer of the Healthy Child Programme Reduce teenage pregnancy Increase educational attainment Improve employment prospects of working families Reduce smoking Increase physical activity Reduce alcohol consumption Increase sexual health screening Reduce the risk of cardiovascular disease and cancer Support people with long term conditions Make children and vulnerable adults feel safe and supported Support independent living Support people with mental health needs Improve care for people living with	Children have the best start in life	Vision A HEALTHIER TORBAY: Where we work together to enable everyone to enjoy a healthy, safe and fulfilling life
Supporting People Strategy Older Person's Strategy	Support people with mental health needs	wellbeing	
	Documents Docume	DocumentsPrioritiesDocumentsPromote the emotional wellbeing of children and young people Provide the full offer of the Healthy Child Programme Reduce teenage pregnancy Increase educational attainment Improve employment prospects of working familiesocal Transport Plan bined Up Health and are hild Poverty Strategy outh Devon and Torbay CG Commissioning Plan orbay Inter-Agency arers Strategy hildren and Young eople's Plan orbay Alcohol Plan bint Strategic Needs ssessment ommunity Safety trategy ommunity Plan conomic Regeneration lan ulture Strategy ousing Strategy icensing Policy upporting People trategy ider Person's StrategyReduce alcohol consumption Increase and cancer Support people with long term conditions Make children and vulnerable adults feel safe and supportedSupport independent living Support people with mental health needs Improve care for people living with dementia and their carers Increase the number of problematic	Documents         Priorities         Outcomes           Documents         Priorities         Outcomes           Documents         Promote the emotional wellbeing of children and young people Provide the full offer of the Healthy Child Programme Reduce teenage pregnancy Increase educational attainment Improve employment prospects of working families         Children have the best start in life           CG Commissioning Plan orbay Inter-Agency arers Strategy hildren and Young eople's Plan orbay Alcohol Plan pint Strategic Needs ssessment ommunity Safety trategy ousing Strategy locensing Policy upporting People trategy ilder Person's Strategy         Reduce smoking Increase exual health screening Reduce the risk of cardiovascular disease and cancer Support people with long term conditions Make children and vulnerable adults feel safe and supported         A healthy life with a reduced gap in life expectancy           Support independent living Support independent living Support people with mental health needs Improve care for people living with dementia and their carers Increase the number of problematic         Improved mental health and wellbeing

#### 2. SCOPE, PURPOSE AND DEVELOPMENT

This Strategy sets out how the Health and Wellbeing Board will encourage organisations in Torbay will work together to meet the needs the community. It explains what the health and wellbeing priorities are in Torbay and how joint action will be taken to make a real impact on people's lives.

It provides the framework for action: promoting prevention, early intervention and targeted support.

Key priorities have been drawn together from partner organisations, building on a sound understanding of evidence provided by the Joint Strategic Needs Assessment.

It has been prepared by the Health and Wellbeing Board in consultation with its wider stakeholder forum. The proposed outcomes and priorities have been subject to a wider consultation process which involved organisations and groups who work in the area of health and wellbeing, as well as residents.

The overall aim of the strategy is to enable communities to focus on reducing inequalities and experience good health and wellbeing throughout life. It takes account of the wider determinants which influence health and wellbeing and sits alongside Torbay's Community Plan (with the shared vision for 'Healthy, Prosperous and Happy Communities'). The Strategy will be used to inform the commissioning plans of the Council and the South Devon and Torbay Clinical Commissioning Group.

#### 3. CONTEXT

#### 3.1 The National Context

#### 3.1.1 The Marmot Review

The Marmot Review in 2010, 'Fair Society, Healthy Lives'<sup>1</sup>, proposed evidencebased strategies for reducing health inequalities including addressing the social determinants of health in England. It concluded that a good start in life, a decent home, good nutrition, a quality education, sufficient income, healthy habits, a safe neighbourhood, and a sense of community and citizenship are the fundamentals for improving quality of life and reducing health inequalities. We understand that, to address health inequalities, we need to improve opportunities for all our residents with a focus on those who are experiencing poverty and deprivation.

#### 3.1.2 Health and social care reforms

The health and social care reforms which have been rolled out since the formation of the Coalition Government in May 2010 have introduced a number of new programmes and initiatives around improving health and wellbeing.

These include:

- a new public health system which will focus on improving the health of the poorest fastest.
- transformational change to the way that health services are commissioned; and
- the establishment of Health and Wellbeing Boards to strengthen partnership working across health and local authorities, underpinned by local democracy.

Torbay's Health and Wellbeing Board understands that, to address health inequalities, organisations across the area need to improve opportunities for all our residents with a focus on those who are experiencing poverty and deprivation.

#### 3.1.3 Outcomes Frameworks

The Outcomes Frameworks which the Government set for the health service<sup>2</sup>, public health<sup>3</sup> and adult social care<sup>4</sup> have a significant role on shaping the

<sup>&</sup>lt;sup>1</sup> Fair Society, healthy Lives. The Marmot Review. University College London, Feb 2010.

<sup>&</sup>lt;sup>2</sup> Health Service Outcomes Framework – include link

<sup>&</sup>lt;sup>3</sup> Public Health Outcomes Framework – include link

<sup>&</sup>lt;sup>4</sup> Adult Social Care Framework – include link

priorities for the local population. The Frameworks set out the Government's strategic direction for health and social care.

#### 3.2 The Local Context

#### 3.2.1 The needs of Torbay

This Joint Health and Wellbeing Strategy is grounded in a firm understanding of Torbay's population and its needs, and national and local trends and drivers as detailed in the Joint Strategic Needs Assessment (JSNA)<sup>5</sup>. It takes a 'life course' approach – providing a picture of local need at each stage of life set against the strategic Outcome Frameworks. It is important to identify that there are also challenges, with reducing public sector funding, in commissioning of services to meet the needs of the local population.

The top priorities emerging from the JSNA are:

- Integration of services for children, public health and safer communities on a locality basis
- Continued focus on inequalities, both for this board and others
- Management of long term conditions
- Alcohol and teenage pregnancy

The JSNA provides a comprehensive analysis of life in Torbay. As a snapshot, on an average day in Torbay:

4 babies are born
5 people die
2,200 appointments are made to see a GP
150 people are seen by an NHS dentist
115 people attend the Accident and Emergency department
30 people are admitted as an emergency admission to hospital
230 attend a first outpatient appointment
580 attend a follow up outpatient appointment
4 people enter Supporting People services
2,470 free school meals are eaten
35 children are absent from school
27 crimes are reported
24 anti-social behaviour incidents are reported
8 domestic abuse incidents take place

<sup>&</sup>lt;sup>5</sup> <u>www.torbay.gov.uk/jsna</u>

#### 3.2.2 Torbay Health and Wellbeing Board and Forum

Torbay's Health and Wellbeing Board will be established on 1 April 2013. Until that time a Shadow Health and Wellbeing Board is in place. The role of the Board is to:

- Have strategic influence over commissioning decisions across health, public health and social care
- Strengthen democratic legitimacy by involving democratically elected representatives and patient representatives in commissioning decisions alongside commissioners across health and social care.
- Provide a forum for challenge, discussion, and the involvement of local people.
- Bring together the Clinical Commissioning Group and the Council to develop a shared understanding of the health and wellbeing needs of the community.
- Drive local commissioning of health care, social care and public health and create a more effective and responsive local health and care system.

The membership of the Health and Wellbeing Board is as follows:

Four members of Torbay Council Director of Adult Services Director of Children's Services Director of Public Health South Devon and Torbay Clinical Commissioning Group Torbay Healthwatch

The range of influence on people's health and wellbeing is such that it is recognised that a number of different organisations operating within Torbay should be included in the work of the Board. The Health and Wellbeing Forum has been established to include representatives from organisations within the following sectors:

Criminal Justice	Economic Regeneration
Housing	Voluntary Sector
Culture and Leisure	Children and Young People
Older People	Health and Social Care Providers

In addition to the Forum, a smaller business planning group and commissioning framework supports the working and functioning of the Board.



Figure 1: Health and Wellbeing Board Planning Framework

#### 3.2.3 Financial landscape

The level of spend within Torbay is considered a shrinking purse with the level of Government funding having an impact. There is an increasing challenge to manage the pressures from demographic changes, advancements in technology and drugs and increasing expectation and levels of need from our residents particularly those with long term conditions. It is predicted that activity is likely to grow by 20% over the next decade across the healthcare system<sup>6</sup>, therefore significant innovation is required.

A key success factor in changing mind sets and shifting behaviour will be for Torbay organisations and businesses to work with communities to deliver on what matters most to them through multi disciplinary locality working.

#### 3.2.4 Policy drivers

There are a range of policy drivers which have played a significant part in the development of the priorities:

Political drivers: Local political leadership, policy and strategy National legislation National and local elections Ability to remain engaged and adaptive

<sup>6</sup> Needs reference

Economic drivers:	Poor economic climate Significant areas of deprivation Welfare reform Climate of recession Payment by results Upward demand pressures Budgetary cuts
Social drivers:	Welfare reforms The Big Society Troubled families programme Elderly care Children's safeguarding The Third Sector
Technological drivers:	Self-care solutions including peer recovery Sharing of information Lack of IT cohesion

#### 4. BUILDING A SUSTAINABLE HEALTH AND WELLBEING STRATEGY

This Health and Wellbeing Strategy is based around an integrated approach which reflects the collective responsibility of communities, the Council and health partners in improving and protecting health; as well as promoting the personal responsibility for one's own health and self-management.

The focus is predominantly on the health and social care related factors that influence people's health and wellbeing with outcomes which address the needs identified in the Joint Strategic Needs Assessment. The outcomes also align with those identified in other strategies<sup>7</sup> which fit within the Community Plan framework.

A set of core underlying principles underpin this strategy.



Focusing attention and effort to address the health and wellbeing inequalities that exist between communities within Torbay

Physical and psychological health and wellbeing is an essential foundation for a prosperous and flourishing society.<sup>8</sup> It enables individuals and families to contribute fully to their communities, and underpins higher levels of motivation, aspiration and achievement. It improves the efficiency and productivity of the labour force which is critical to ensuring economic recovery.

Poor health and wellbeing also costs a great deal through medical and social care costs, reduced productivity in the workplace, increased incapacity benefits, and many other calls on public services and community support.

Our most deprived communities experience the poorest health and wellbeing, so systematically targeted approaches on the geographical areas and population groups at greatest need is crucial in reducing inequalities.

Early Intervention

#### Improving overall outcomes and ultimately reducing cost with a focus on prevention rather treatment

The White Paper 'Healthy Lives, Healthy People: Our Strategy for Public Health in England'<sup>9</sup> set out the future for public health. It sets out a framework for tackling the wider social determinants of health and requires structures to be put in place to promote prevention, early intervention and targeted support.

<sup>&</sup>lt;sup>7</sup> These strategies are listed in the diagram in Section 1 of this Strategy.

<sup>&</sup>lt;sup>8</sup> Enabling effective delivery of Health and Wellbeing an Independent Report (2010)

<sup>&</sup>lt;sup>9</sup> Department of Health. (2010) Healthy Lives, Healthy people: Our strategy for public health in England

Integrated and joinedup approach

# Joining up planning, commissioning and delivery at a local level

Putting public health responsibilities firmly back into local government with a ring fenced budget will ensure that local government and local communities are central to improving the health and wellbeing of the population and tackling inequalities.

The need for departments and organisations to work together has never been more important as there is a co-dependency between housing, education, employment; leisure and the general environment and the impact that these factors have on an individual's ability to work or take part in society. This is illustrated by Dahlgren and Whitehead's model below.

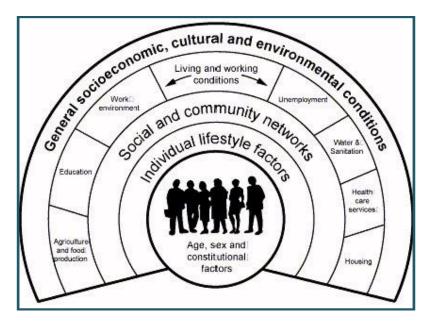
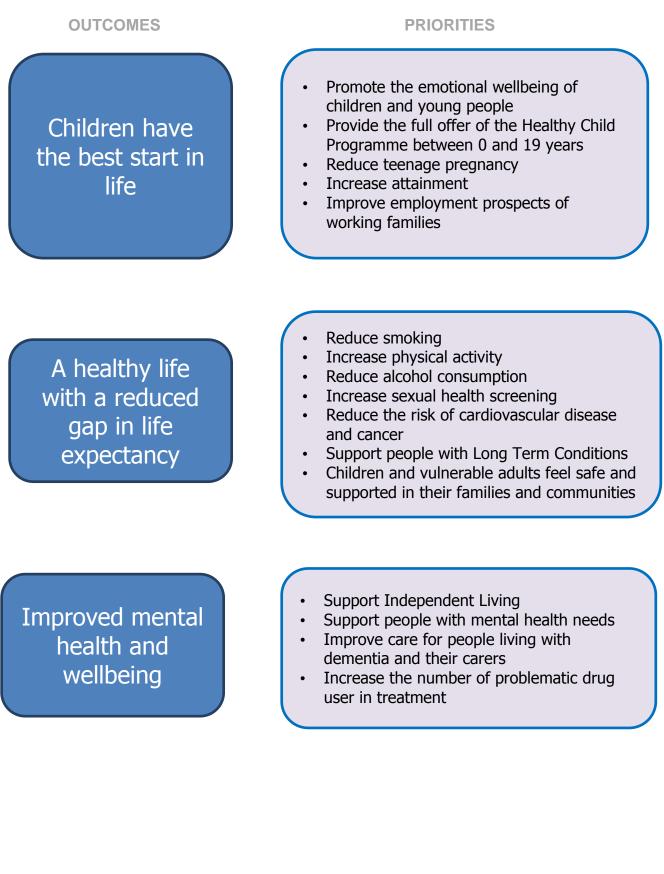


Figure 2: Source Dahlgren and Whitehead 1991

Torbay and Southern Devon Health and Care NHS Trust in partnership with the Council is a national leader in the transformation of community based health and adult social care services; targeting prevention and greater integration of services. Therefore, in addition to working collaboratively with business and the voluntary sector, we can open up the opportunity for greater synergy across organisations and between departments, in terms of strategic intent and planning as well as operational delivery, to ensure whole system transformation continues to take place.

#### 5. TORBAY OUTCOMES AND PRIORITIES



# **Outcome 1** Children have the best start in life

The Marmot Review in 2010 (*Fairer Society, Fairer Lives*) was clear that what a child experiences during their early years lays down a foundation for the whole of their life and this impacts on their school readiness and educational attainment.

Where a child lives is important as children from disadvantaged backgrounds are more likely to begin primary school with lower personal, social and emotional development and communication, language and literacy skills than their peer. Therefore, if we do not succeed at the beginning in a child's life, then the disadvantages are far reaching for the rest of their years.

We want all families to realise their children's potential, helping them to prepare from an early age to be self-sufficient, with a network of support to enable them to live independent and healthy lives. We understand that some families will need more support than others and will respond with targeted programmes.

#### **Priority 1**

Promote the emotional wellbeing of children and young people

- Promote the role of health in schools, with its focus on reducing child poverty, improving emotional health and wellbeing and reducing substance misuse (including alcohol) and smoking
- Introduce children's Improving Access to Psychological Therapies service
- Increase access to education, training, employment and housing particularly increasing opportunities for young

#### **Priority 2**

Provide the full offer of the Healthy Child Programme between 0 and 19 years

- Children centre community hubs provide parenting support to ensure improved child development and school readiness
- 'Joined up' preventative services working in communities as a team with integrated care pathways leading to 'Early Help'
- Joint commissioning arrangements in place for health, social care, public health focused on services for children

- Ensure young women under 25 have access to a range of comprehensive sexual health services and contraception
- Promote sex and relationship education within education establishments
- Extend and improve use of communication methods with development of 'app'

#### **Priority 4** Increase attainment

- Support schools in removing any barriers to achievement, especially for children and young people in care and those with complex needs so as to enable them to achieve more in line with their peers
- Develop the partnership with Oldway Teaching School to support schools in raising attainment for all children
- Through the Torbay Improving Schools Partnership, promote a culture of shared accountability and responsibility for the outcomes for all children across Torbay
- Work with schools and local providers to ensure that there is a broad and balanced curriculum offer which enables all children to reach their full potential

#### **Priority 5**

Improve employment prospects of working families

- Reduce the number of troubled families living in workless households though the troubled families programme
- Increase the skill levels of practitioners working with low-income families and workless families so that that they can appropriately assist the families in accessing employment and training opportunities
- Ensure education, training and employment status and plans are including within newly developed single family assessment tools and pathways.

## Outcome 2

# A healthy life with a reduced gap in life expectancy

Life expectancy in Torbay is in line with national estimates. However, there is noticeable variation between where people live. For example, males in Tormohun having a life expectancy of 74.5 years compared to those living in Churston with Galmpton having a life expectancy of 82.4 years.

High levels of deprivation, low educational attainment, unhealthy lifestyle factors (high smoking, poor diet, low physical activity hazardous and harmful drinking) and access to quality primary care are all interrelated determinants of early death and lower life expectancy. In particular, smoking contributes to half of the life expectancy gap. Life expectancy is also significantly lower in certain groups such as those with severe mental illness, learning disabilities or problematic drug users.

We will work in partnership to prevent people becoming ill in the first place by supporting our residents to address the key lifestyle risk factors of smoking, physical inactivity and alcohol misuse, which are more common in the deprived areas of the bay. We will also encourage early diagnosis and management of the major killer diseases such as cardiovascular disease and cancer as reducing deaths from these diseases. We will develop specific programmes to address inequalities in health behaviours amongst young women in Torbay. We will provide an effective public protection and safeguarding system so that children and vulnerable adults are protected, feel safe and supported in their families and communities.

To achieve a reduction in the life expectancy gap, our actions will range from universal to targeted to meet the different levels of need, as appropriate – what Marmot terms 'proportionate universalism'.

#### Priority 6

Reduce smoking

- Target stop smoking advice and support to routine/ manual 35+yrs as part of Torbay Well@work 2012 with larger employers.
- Target stop smoking advice and support to mothers who are pregnant to stop smoking as well as women under 25yrs
- Encourage schools to integrate anti-smoking messages into the curriculum.

- Ensure the regeneration of Torbay improves the physical environment to encourage physical activity and reduce obesity, in particular developing cycling and walking routes and use of green gyms
- Scale up brief intervention training in physical activity and healthy eating for staff and communities
- Promote NHS Health Trainers and Health Champions programmes

#### **Priority 8**

Reduce alcohol consumption

- Continue to include alcohol screening in the NHS Healthchecks programme as this programme (focused on identifying and supporting those at high risk of cardiovascular disease, including hypertension) expands
- Extend the range of Identification and Brief Advice opportunities available through non-medical settings for people with alcohol problems e.g. safeguarding and early intervention services
- Improve pathway between hospital and community treatment services for people with alcohol related problems
- Promote and support peer-led recovery opportunities in the community

#### **Priority 9**

Increase sexual health screening

- Review and commission sexual health services which are accessible and offer choice of venue and opening times
- Provide training opportunities to ensure qualified practitioners are able to offer a comprehensive range of contraception, screening and testing opportunities
- Use social marketing techniques to promote awareness of HIV and sexually transmitted infections

Reduce the risk of cardiovascular disease and cancer

- Develop primary care based clinical infrastructure with a particular focus on preventative measures and diagnostics and management of these conditions
- Expand the NHS Health Checks programme to full roll out, ensuring it reaches those most at risk and that they are supported to make lifestyle changes
- Continue to improve the uptake in breast and bowel cancer screening

#### Priority 11

Support people with Long Term Conditions

- Focus on chronic disease management and case management to improve the patient experience and outcomes particularly diabetes, chronic obstructive pulmonary disease, stroke and heart failure
- Increase range of integrated services being delivered and provided in primary care and community which will reduce urgent and emergency admissions, ambulance care and alternatives to follow ups
- Offer alternative clinical management pathways to acute services referral following primary care led assessment or clinical referral triage
- Review and strengthen self-management and patient education programmes to support patients in managing their own conditions
- Continue to offer more choice, control and greater independence through personal budgets to support those living with long term conditions

#### Priority 12

Children and vulnerable adults feel safe and supported in their families and communities

- Maximise safeguarding of the most vulnerable children and their families through continued development and review of early intervention and universal services.
- Reduce the risk of serious harm to vulnerable victims of domestic abuse and their families.
- Reduce the risk of distress and harm to vulnerable members of the community subject to anti social behaviour and crime.

### **Outcome 3** Improved Mental Health and Wellbeing

Mental health is everyone's business. As *No Health Without Mental Health* states, 'good mental health and resilience are fundamental to our physical health, our relationships, our education, our training, our work and to achieving our potential.'

At any one time, roughly one in six of us is experiencing a mental health problem. We need to build resilience, promote mental health and wellbeing, and challenge stigma and discrimination. We need to prevent mental ill health, intervene early when it occurs, and improve the quality of life of people with mental health problems and their families

We want all residents in Torbay to enjoy the best possible mental health and wellbeing and have a good quality of life – a greater ability to manage their own lives, stronger social relationships, a greater sense of purpose, the skills they need for living and working, improved chances in education, better employment rates and a suitable and stable place to live.

#### Priority 13

Support independent living

- Tackle the difficulties people have accessing affordable housing, particularly young disabled adults wanting to leave home and those with poor mental and emotional health
- Increase the number of annual health checks within primary care to promote early diagnosis, treatment and prevention of long term condition
- Enable people with learning disability to live independently or interdependently with support and housing care
- Further develop self care support systems through implementation of telehealth, telecare, personal budgets, assistive technology, advice and information
- Identify and support unpaid carers in their caring role and in their life apart from caring; involve carers in all developments affecting them and the people they care for
- Improve care and choice in end of life care by continuing to implement the Gold Standard Framework within nursing and residential care homes

making sure that there is access to hospice care and care at home at end of life to ensure dignity and choice for people who are dying

• Engage and work with nursing and medical practitioners to design a workforce to support the shift from hospital based care to care closer to home

#### Priority 14

Support people with mental health needs

- Commission and promote arts, culture and leisure opportunities and events to improve mental well being and quality of life
- Work with libraries, museums, leisure centres to improve access to health information and support services
- Improve access to psychological therapies
- Continue to offer 'Mental Health First Aid' training which aims to identify mental health problems early
- Further develop improved care pathways for people living with an eating disorder, autistic spectrum condition or a dual diagnosis

#### **Priority 15**

Improve care for people living with dementia and their carers

- Provide education and awareness programmes which will improve earlier diagnosis rates
- Commission a dementia advisor service to enable easy access to care, support and advise following diagnosis
- Ensure appropriate use of antipsychotics, by continuing to audit and monitor local prescribing
- Continue to commission the third sectors in delivery of peer support services
- Improve care in care homes by considering the benefits of a specialist liaison service to work proactively with residential and nursing homes by providing advice, support and an awareness and education programme

#### Priority 16

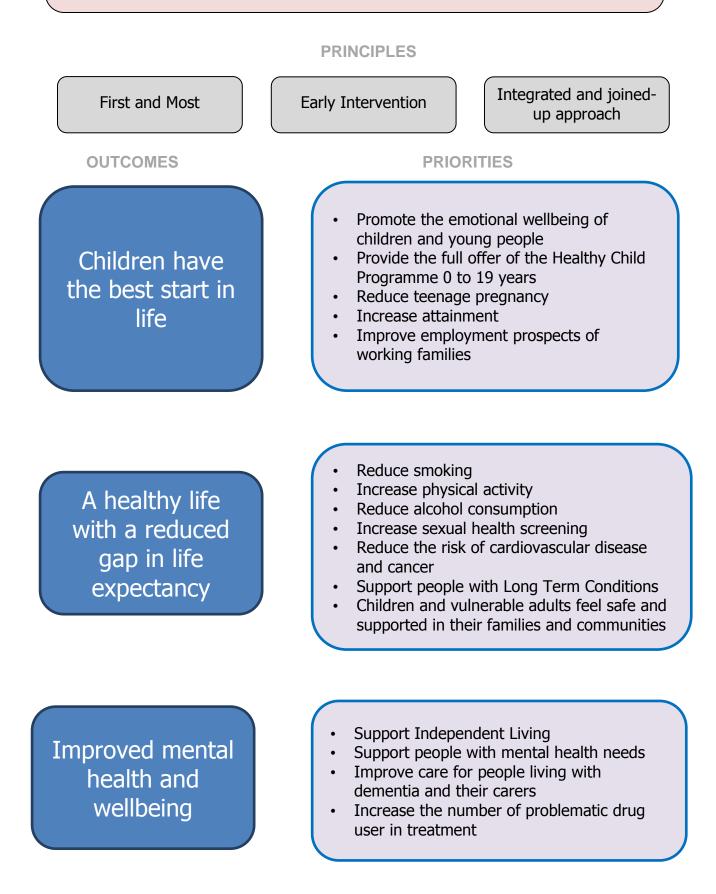
Increase the number of problematic drug users in treatment

- Developing and improve opportunities for recovery capital for people with drug and alcohol issues and maintain timely safe and effective access to treatment
- Promote and support peer-led recovery opportunities in the community

# TORBAY JOINT HEALTH AND WELLBEING STRATEGY

VISION

# **A Healthier Torbay:** Where we work together to enable everyone to enjoy a healthy, safe and fulfilling life



#### 6. Glossary

**Cardiovascular disease** - a class of diseases that involve the heart or blood vessels (arteries, capillaries and veins). Cardiovascular disease refers to any disease that affects the cardiovascular system.

**Chronic obstructive pulmonary disease** (**COPD**) – a progressive disease that makes it hard to breathe. COPD can cause coughing that produces large amounts of mucus, wheezing, shortness of breath, chest tightness, and other symptoms. Cigarette smoking is the leading cause of COPD. Long-term exposure to other lung irritants—such as air pollution, chemical fumes, or dust—also may contribute to COPD.

**Director of Adult Services -** responsible for promoting local access and ownership of services for adults and, in doing so, ensure that information about services and entitlement to services is communicated to users and potential users of adult services as well as their families, carers and the wider community. The Director of Adult Services will provide a key professional leadership role for staff working in adult social care services. He or she will also have a key role in ensuring accountability of services to local communities through consultation with local people and, in particular, users of services.

**Director of Children's Services** - responsible for children's social services, schools and childcare. Areas of responsibility include; safeguarding children and securing delivery of the council's corporate parenting duties, planning and funding education for children aged three to five and planning childcare opportunities for children aged five to 13, statutory duties in relation to children with special educational needs, providing or ensuring sufficient school places for pupils aged five to 18, standards in all schools funded by the Council, liaising with the Young People's Learning Agency on education for students aged 14-19, commissioning local youth services and support for vulnerable children and young people.

**Director of Public Health -** The Director of Public Health is the most senior advocate for public health across the local authority area. He or she is responsible for promoting and protecting health and wellbeing, tackling health inequalities, and improving health care quality and strengthening the capacity across the whole public sector to improve the health of the population.

**Health and Wellbeing Board** – a group of local commissioners across the NHS, public health and social care, elected representatives, and representatives of HealthWatch who discuss how to work together to better the health and wellbeing outcomes of the people in their area.

**HealthWatch** - A local HealthWatch is an independent organisation, able to employ its own staff and involve volunteers, so it can be the influential and effective voice of the public. The aim of local HealthWatch is to give citizens and communities a stronger voice to influence and challenge how health and social care services are provided within their locality. **Healthy Child Programme -** This gives comprehensive advice on health and social care throughout a child's life. It differs from the previous schedule of child health surveillance in several key ways: greater focus on antenatal care, a major emphasis on support for both parents, early identification of at-risk families, new vaccination programmes, and new focus on changed public health priorities.

**Identification and Brief Advice** - It is a method of case finding (Identification) followed by simple alcohol advice (Brief Advice). Research has shown it to be an effective method when delivered to those who drink at "increasing" and "higher" risk levels. Brief advice is designed to motivate and encourage people to change their drinking behavior. It aims to encourage the recognition of potential harm that can be associated with excessive drinking. It also encourages people to consider reducing their alcohol consumption to sensible limits in order to reduce the risk of future health problems.

**Improving Access to Psychological Therapies** - is a government programme to improve access to talking therapies. Talking therapy can be used as an alternative or in addition to medication, which GPs might provide for mild to moderate mental health problems.

**Independent Living** - Independent Living is about disabled people having voice, choice and control over any support they need to go about their everyday lives. This means: greater choice and control over any assistance they need to go about their everyday life, access to housing, transport, health, social care, education, employment and other services and opportunities and participation in family, community and civic life.

**Joint Health and Wellbeing Strategy** - The strategy is a plan that will aim to improve the health and wellbeing of people in the local area. It will focus on a small number of local health and wellbeing priorities and will also include some measurement of how we are doing in improving these priorities.

**Joint Strategic Needs Assessment -** describes a process that identifies current and future health and wellbeing needs in light of existing services and informs future service planning taking into account evidence of effectiveness. Joint Strategic Needs Assessment identifies 'the big picture', in terms of the health and wellbeing needs and inequalities of a local population.

**Mental Health First Aid** - is the help provided to a person developing a mental health problem or in a mental health crisis. The first aid is given until appropriate treatment is received or until the crisis resolves.

**NHS Health Checks** - The NHS Health Check is for adults in England between the ages of 40 and 74. It involves a few straightforward health tests and some simple questions about medical history. The results of NHS Health Checks give patients and GPs a clearer picture of a patient's health and risk of developing one of the vascular diseases. **South Devon and Torbay Clinical Commissioning Group** - Clinical commissioning groups are groups of GPs that, from April 2013, will be responsible for designing local health services In England. They will do this by commissioning or buying health and care services.

**Supporting People Services** - a UK government programme helping vulnerable people in England live independently and keep their social housing tenancies. It is run by local government and provided by the voluntary sector.

**The Big Society** - The aim is to create a climate that empowers local people and communities, building a "big society" that will take power away from politicians and give it to people.

**The Third Sector** - The 'third sector' is the term used to describe the range of organizations that are neither public sector nor private sector. It includes voluntary and community organizations (both registered charities and other organizations such as associations, self-help groups and community groups), social enterprises and co-operatives.

**Torbay and Southern Devon Health and Care NHS Trust** - the NHS organisation responsible for providing community health services in Torbay and Southern Devon, as well as providing and commissioning (buying) adult social care in Torbay.

**Torbay's Community Plan** - The plan aims to unlock Torbay's potential and drive forward its economic prosperity to deliver our vision of healthy, prosperous and happy communities with a higher quality of life and improved access to jobs. The need for sympathetic economic regeneration is supported by a host of statistics and national indicators that predict low paid work and little prospects for the future unless something is done about it.