Equally Well:

A healthier, fairer future for North Tyneside

2021 – 2025

North Tyneside Health and Wellbeing Board

IMPLEMENTATION PLAN

Equally Well : Best Start In Life

Leads: Wendy Burke, Janet Arris, Jill Harland

Governance: Children and Young People's Partnership

Actions	Responsibility	Short-term outcomes	Long-term outcomes	Proposed KPIs outcomes
Develop and deliver a model for Family Hubs	Best start in life (BSIL) steering group (multi-agency)	Families have seamless access to information and support	**Prospective and new parents are supported as they make the transition to parenthood**	Across our most disadvantaged areas we will see:
Consult and publish the Start for life offer.		Reduction in smoking in pregnancy		• Increase in the rates of breastfeeding
New NHS LTP Tobacco Dependency model will be implemented by quarter 4.	Northumbria Healthcare NHS Foundation Trust	Increase uptake of healthy start vitamins especially for families eligible for the free scheme	**Mothers and babies have positive pregnancy outcomes**	• Reduction in smoking in pregnancy • More children achieving a good level of development at the 2-2.5 year health and development review.
Reducing Parental Conflict training is rolled out to frontline staff	Early Help (NTC)	Practitioners' confidence and ability to provide support for parents in conflict will be improved	**Babies and parents/carers have good early relationships to promote attachment.**	• Good level of development at age 5 with free school meal status (%)
Implement the new breastfeeding strategy	All partners (Breastfeeding Strategy Delivery Group)	Increase in breastfeeding in our more deprived communities.	**Parents experiencing emotional, mental health and wellbeing challenges are identified early and supported**	

Community Engagement and mobilising community assets

Consultation on the Start for Life offer and Family Hubs.

VCSE will be a critical conduit for disseminating the start for life offer

Delivery of the Breastfeeding Strategy includes peer support

Actions (cont.)	Responsibility (cont.)	Short-term outcomes (cont.)	Long-term outcomes (cont.)
Review supply of healthy start vitamins especially for families eligible for the free scheme	School Improvement Early Years (NTC)	More children achieving a good level of development at the 2-2.5 year health and development review.	**Children and parents/ carers have good health outcomes**
Effective implementation of Revised EYFS	Early Help / Early Years (NTC)	More children achieving a good level of development at the end of reception	**Children and parents / carers are supported with early language, speech and communication**
2 Matters – promote the award for settings working with funded two-year-olds with more vulnerable children.		EYFSP – narrowed gaps between more disadvantaged groups	**Children have access to high quality early years provision and are ready to learn for nursery and ready for school and achieve a good level of overall development**

Links to other priorities

Needs a dotted line to 'Ensuring a healthy standard of living for all' workstream.

Addressing family poverty

Healthy Standard of Living for All: parents/ carers are in secure employment or in training

Equally Well: Maximising capabilities of children, young people, and adults.

Leads: Lisa Cook, Mark Barratt, Janet Arris/Anne Foreman, Ruth Auten

Governance: Children and Young People's Partnership

Actions	Responsibility	Short-term outcomes	Long-term outcomes	Proposed KPIs
Achievement for all with a focus on the most vulnerable children – as part of the ambition for Education.	Strategic Education and Inclusion Programme Board	Reducing inequalities in pupils' educational outcomes is a sustained priority.	**Narrow the gap in attendance and attainment in our most vulnerable children.**	Reduced gaps in educational attainment
Route 16 Pilot to smooth transitions for a specific cohort of young people.	Strategic Education and Inclusion Programme Board	Increase in levels of school attendance in lowest attaining schools	**A child's progress, strengths and needs are identified at an early stage in order to promote positive outcomes**	Attendance and exclusion data
Roll out of Youth Mental Health First Aid (MHFA) across schools in second and third cohorts	CYP Mental health partnership	School staff trained in Youth Mental Health First Aid (MHFA) are able to identify children and young people at risk of developing mental health problems and to support them to get appropriate professional help	**Schools, families and communities work in partnership to reduce the gradient in health, wellbeing and resilience of children and young people**	Percentage of 16–18-year-olds not in education, employment or training
Pilot a model of 'sleep' support including a community sleep clinic.	Barnardo's Strategic Alliance.			Apprenticeship & destination data
Implement and launch new framework for revised parenting offer including mental health and children with SEND and reducing parental conflict	Strategic Education and Inclusion Programme Board	Increase in uptake of training and development and apprenticeships for 16–25-year-olds	**Improved physical and mental wellbeing of young people**	Hospital admissions as a result of self-harm (10-24 years)
Improve early language and reading with a focus on SEND and improving outcomes for disadvantaged	SEND Strategic Board	Reduction in the proportion of pupils being referred for Social Emotional Mental Health.	**Improved access and use of quality lifelong learning across all communities**	Increase in adult learning completers in education / employment across the lifecourse
Pilot programme in two schools to embed careers into the school curriculum	Strategic Education and Inclusion Programme Board	Easily accessible support and advice is available for 16–25-year-olds on life skills, training and employment opportunities	**Increase proportion of 16–18-year-olds in post-16 education or training**	
Review and develop programme of post 16 support	Strategic Education and Inclusion Programme Board	Increase access to and uptake of adult learning with a specific focus on those living in the 25% most deprived areas in NT	**Reduced proportion of 18–24-year-olds claiming JSA.**	
Review lifelong learning opportunities – including older people accessing digital technology and retirement courses	Ageing Well Board	Increased availability of non-vocational lifelong learning across the life course, including retirement	**Reduced rates of first / repeat offences in 16–24-year-olds**	
			Reduced rates of teenage pregnancy.	
			Reduce levels of anti-social behaviour, drug and alcohol misuse among young people.	

Community Engagement and mobilising community assets

Children in Care Council, SEND Youth Forum and the Youth Council

Emotional Wellbeing Advisory Panels.

CYP Peer Supporters for Mental Health and Wellbeing

Engagement with the Wallsend Children's Community

Links to other priorities

Ensure a healthy standard of living for all

An integrated health and care system

The places and communities we live in

Equally Well: Fair Employment and Good Work for All.

Leads: John Sparkes, Gary Charlton, Ruth Auten/Kate Thompson

Governance: North Tyneside Employability Partnership and Strategy Group

Actions	Responsibility	Short-term outcomes	Long-term outcomes	Proposed KPIs
Needs Assessment of population and insight data to understand employment and skills of different residents and communities	Public Health / Performance and Intelligence team	In depth understanding of residents and communities needs for employment and skills support	More residents from groups identified as being furthest away from the labour market will be supported into employment	**Across our most disadvantaged communities we will see:** Fewer NEET aged 18-24 A reduction in unemployment %
Specific sector analysis to identify issues and solutions regarding recruitment and retention e.g., health and social care sector.	Adults and Children's Social Care	Targeted health and social care recruitment drive	It will be easier for people who are disadvantaged in the labour market to obtain and keep work	Reduction in long-term claimants of Jobseeker's Allowance Increase proportion of employed adults earning the living wage
Delivery of employability projects targeting support at disadvantaged groups.	Employment and Skills Team	Increase in the skills levels of residents	More good quality jobs will be created	Reduction in the disability employment gap.
Pilot the North Shields Employability Hub – Working Well North Tyneside	Employment and Skills Team	Increase in the number of people in Education and Training	Improvement in young people's transition from education to employment	Reduced rates of sickness absence across North Tyneside
Rollout of Skills Bootcamps to support recruitment and progression	Employment and Skills Team	Increase the number of residents moving into work	Increase in the number of new business start-ups.	
Supporting over 50s back to work, upskilling people to work in the digital environment		Increase the number of residents receiving enterprise support	Improved local workforce skills across the social gradient	**Community Engagement and mobilising community assets**
Digital Outreach Project (DOP) supporting informal digital skills development and digital champions training.	Employability Partnership and Strategy Group	Increase the number of Apprenticeships available to local residents	Increased wage levels and reduction in wage gap	Community engagement to inform the development of the North Shields Employability Hub
Work with businesses involved in major developments to deliver corporate social responsibility commitments to increase the number of jobs opportunities, including apprenticeships, available to local residents.	Employability Partnership and Strategy Group	Supporting employers to provide healthy physical environments, promoting wellbeing and providing mental health support when required Numbers of people completing digital champion training	More businesses will be supporting the health and wellbeing of their staff and reducing sickness absence rates Increase in numbers of organisations and business signed up to North of Tyne Good Work Pledge Improved wellbeing and job satisfaction among working population Digitally confident workfoce	Digital Champions across communities

Links to other priorities

Enable all children, young people and adults to maximise their capabilities and have control over their lives – regarding lifelong learning

Ensure healthy standard of living for all – re addressing in work poverty

Equally Well: Ensure a healthy standard of living for all

Leads: Jacqueline Laughton, Gary Charlton, Jill Harland

Governance: Poverty Partnership

Actions	Responsibility	Short-term outcomes	Long-term outcomes	Proposed KPIs outcomes
Setting up a multi-agency partnership to coordinate efforts to support people re the cost-of-living crisis across the system	North Tyneside Council lead agency	Increased benefit uptake and income for residents	**More people achieving a healthy standard living above the relative poverty threshold**	**Across out most disadvantaged communities we will see**:
Maximise residents' income by delivering benefits take up advice and campaign via CAB and Age UK.		Support for residents in work poverty		Reduction of number of children in poverty
Support financial capacity and inclusion by delivering projects with essentials such as food, energy, and clothing, using the household support fund.	Citizens Advice Age UK	Awareness raised and information given about managing energy bills and heating efficiently	**Early identification of people at risk of getting into crisis e.g. homelessness.**	Reduction in number of households not reaching Minimum Income Standard (%)
Develop and publish the digital inclusion strategy to ensure all residents can benefit from digital technology				Fuel poverty for high fuel cost households (%)
Support every school in North Tyneside through the Poverty Proofing the School Day training, delivered by Children North East.	North Tyneside Council	Schools receive training to implement reducing poverty impact for young people.	**Residents able to navigate the benefits system – smoothing the cliffe edge between in and out of work poverty**	Reduction in the number of residents experiencing digital exclusion
Fund schools to set up their own school uniform schemes to reduce the cost of the school day for families.	North Tyneside Schools	Children have access to nutritious food and activities during school holidays.	**Young people have an equitable experience within school**	
Continue to manage and extend the Holiday Activities and Food programme, to ensure that vulnerable children in low-income families access nutritious food and enriching activities during the school holidays.	VCSE Sector	Support given to families during school holidays to support the expense of this period.	**Residents improve their homes to be more energy efficient.**	**Community Engagement and mobilising community assets**
Provide supermarket vouchers to families on FSM for all school holidays up until the end of the academic year 2021/22 and potentially beyond, dependent on funding.	North Tyneside Council (Social Inclusion Team, Public Health, Digital Inclusion Team)	Bread and Butter things established within 5 Communities.	**All residents have physical access, economic ability & knowledge to access and consume healthy food**	Ensuring that the skills, knowledge, resources, and networks of the VSCE are maximised to reach residents affected by cost-of-living crisis.
Continue to provide Healthy Start Scheme vouchers for pregnant women and children under 4 in eligible low-income families.	The Bread-and-Butter Thing	Increase uptake of healthy start vouchers		Cross sector partnership to develop the digital inclusion strategy – considering barriers and access funding for future projects
Deliver community-based projects which enable low-income households to access affordable healthy food. This includes launching The Bread-and-Butter Thing (TBBT) in five community hubs in 2022.	North Tyneside Council	Community Energy Champions recruited and trained	**Residents are digitally confident and connected both in terms of physical access to technology and digital connection**	Increased Opportunities Committee
Extend the Council Tax Support Scheme backdating rules to 20 weeks.	North Tyneside Council	Delivery of the DfE funded scheme delivering laptops and wifi devices		**Links to other priorities:**
Directly support residents in fuel poverty by delivering the Green Homes Grant Local Authority Delivery Scheme for residents on low incomes to improve home energy efficiency and through the Welfare assistance scheme or those in crisis.	North Tyneside Council / VCSE			Maximising the capabilities of Children, Young People and Adults Best Start in Life Our lifestyles and healthy behaviours
Raise awareness of how to save energy through targeted leaflet campaign, energy bingo events at community centres and the recruitment of community energy champions.				The Places and Communities we live in

Equally Well: The Places and Communities we live in and with

Leads: Sam Dand, Gary Charlton, Mike Blades / Paul Jones / VODA TBC

Governance: Safer North Tyneside Partnership, Climate Change Partnership, Culture Partnership and North Shields and Wallsend Master Plans

Actions	Responsibility	Short-term outcomes	Long-term outcomes	Proposed KPIs
Deliver the Health inequalities VCSE small grants funding and monitor projects	VODA / NTC	Proposed solutions and interventions to reduce inequalities are co-produced and fully informed by the lived experience of North Tyneside residents.	Building on communities' assets and strengthening our work with communities across the system	**Across our most disadvantaged communities we will see:**
Living Well North Tyneside will be kept up to date and promote widely so residents who want to can be actively involved in their communities.	NTC Corporate strategy	More socially connected communities with more opportunities for all residents to take part in community life	Adequate resourcing of VCSE to support their work	Improved results in resident survey - participation / safety, accessing services/ parks/ beaches etc.
Develop the Community Hub model to host and provide universally accessible services in all communities e.g. (Drug and Alcohol, Police, CAB, ASC, OT, Reablement and Care Call)	NTC Corporate Strategy Team and Partners	Active travel infrastructure will enable more residents from disadvantaged communities to access education, employment and leisure opportunities.	Clean, green and safe open spaces across the Borough	Fewer socially isolated residents
			Improved digital inclusion	Reduction in the number of residents who are digitally excluded
Review the Social prescribing offer across the system	Commissioning / Public Health		Integrated planning, housing, environmental and health systems in place	More residents feeling safe in their communities
Pilot Healthy, Happy Places in North Shields and Wallsend which aims to shape places to benefit mental health and wellbeing in our communities.	Academic Health Science Network for the North-East and North Cumbria/ Public Health and PCNs	Increased levels of volunteering	Well-designed communities with decent homes and good transport links	Number of affordable housing units developed
		A supply of good quality affordable homes for those most in need	Access to arts and culture and outdoor spaces that provide opportunities to connect with others	Number of energy efficient improvements made in private sector
Development of Strategic Cycling Route network to increase opportunity for active travel	Regeneration	Improved active travel across the social gradient	Support community regeneration schemes that remove barriers to community participation and reduce social isolation.	**Community Engagement and mobilising community assets**
Review the community safety board and take a public health approach to community safety	Safer North Tyneside Partnership	Improve the accessibility, existing parks, green spaces and beaches to promote good mental health and physical activity		Supporting community engagement of the implementation plan
Expand the safe and healthy homes initative to support more households in need	Regeneration		Improved energy efficiency of housing across the social gradient.	Connecting diverse communities to local policy makers to ensure their voices are central to the commissioning, and decision-making process in North Tyneside.
Deliver more energy efficiency measures to reduce fuel poverty	Housing		Improved the food environment in local areas	
			Reduced social isolation	**Links to other priorities**
Establish a cultural compact that supports health and wellbeing and reduces inequalities	Culture and wellbeing partnership		More residents feeling safer in their local community	Communities and Place are a golden thread across all priorities
			Social prescribing becomes a routine part of community support	

Equally Well: Our lifestyles and healthy behaviours across the life course

Leads: Wendy Burke, Jill Harland, Gary Charlton

Governance: Active North Tyneside, Tobacco Alliance, Healthy Weight Alliance, Strategic Alcohol Partnership, Living Well Locally Board, NHCT Inequalities Board

Actions	Responsibility	Short-term outcomes	Long-term outcomes	Proposed KPIs outcomes
Strengthen treatment pathways for people who smoke to support them to quit, including those admitted to hospital and other targeted groups	North Tyneside Council (Public Health, Early Help, Schools Improvement)	People who smoke are supported to quit	**Children are exposed to less second-hand smoke and are less likely to start smoking due to a reduction in illicit tobacco**	Across our most disadvantaged areas we will see:
Support businesses to identify, support and signpost employees drinking at increasing and higher risk levels		Adults and under-18s who drink alcohol at harmful levels are identified and supported to reduce their drinking	**People who require specialist alcohol support are identified and able to access appropriate services and all residents are less likely to be affected by all aspects of alcohol-related harm.**	• Reduction in smoking
Target schools, GP practices and other community services in areas with high rates of under-18s and adults being admitted to hospital due to alcohol to ensure appropriate support in place	Active North Tyneside Partnership			• Reduction in alcohol-related hospital admissions (adults and under 18s)
Targeted delivery of bespoke weight management programmes in communities with inequalities, including a Healthy4Life pilot in school, HENRY, Body Benefit and HowFit approaches	Northumbria Healthcare NHS Foundation Trust (Public Health, Inequalities Board and Tobacco Dependency Steering Group)	Adults and children are supported to achieve a healthy weight	**Children are less likely to be affected by the broader effects of excess weight in childhood and less likely to become overweight as adults**	•Reduction in children with excess weight (NCMP indicators)
Delivery of the Active North Tyneside Programme to improve access to free/affordable healthy behaviour change interventions and physical activity across the lifecourse				•Increased physical activity in hospital inpatients
Deliver a community offer for blood pressure, atrial fibrillation, and diabetes checks	North Tyneside CCG	People have access to cancer services and interventions to support early diagnosis to promote the best possible outcomes	**Inequalities in health outcomes driven by the food environment and wider environment are reduced, leading to lower levels of excess weight and cardiovascular disease**	•Increased uptake of cancer screening programmes
Embed and sustain learning from NHCT Active Hospitals pilot to continue to support people in hospital with physical activity	North Tyneside Recovery Partnership			•Reduction in drug-related deaths and unmet need
Develop partnership approach with VCS to reach vulnerable groups with poorer cancer outcomes			**Residents have improved awareness of cancer and are supported to receive earlier diagnoses to promote the best possible outcomes**	
Support people affected by drug misuse including exploring opportunities to embed a substance misuse social worker into treatment services, developing the M-PACT programme to support the wellbeing of children and families affected by substance misuse and developing processes to learn from drug-related deaths		Healthcare professionals have increased capability and opportunities to promote physical activity to people in hospital and are able to signpost patients appropriately	**Harm from illicit drug use is reduced, in line with the findings of the Dame Carol Black review**	Consultation on approaches to reduce alcohol-related harm and improve healthy weight
Ensure those with lived experience of substance misuse can shape and influence services			**HWB Board partners promote HEiAP and MECC approaches to recognise and reduce the impact of inequalities**	Co-production of cancer prevention work
Develop a Health Equity in All Policies (HEiAP) approach including training materials and champions to improve understanding of health inequalities across all Health and Wellbeing Board partners		People using drugs or affected by drugs are identified and supported, and so are their families		Co-production of MECC at scale work
Promote a Making Every Contact Count (MECC) approach across the borough, particularly in targeted areas, to impact on lifestyles and behaviours across the lifecourse				

Community mobilising community assets

Needs a dotted line to 'Best Start in Life' workstream

Reduction in smoking in pregnancy

Needs a dotted line to 'The Places and Communities we live' – cycling, green space indicators

Equally Well: An integrated health and care system

Leads: ASC TBC , Anya Paradis , Ross Wigham (TBC)

Governance: NENC Integrated Care Board Place Based Arrangements for North Tyneside (details are yet TBC)

Actions	Responsibility	Short-term outcomes	Long-term outcomes	Proposed KPIs outcomes
Establish the Integrated Care Board Place Based arrangement for North Tyneside	ICB	It will be easier for residents to 'navigate' the system	Our most vulnerable residents to live healthier and fulfilling lives and maintain independence for longer	**Across our most disadvantaged communities we will see:**
Four Primary Care Networks (PCNs) will build on collaborative work around extended hours access, access to clinical pharmacy and development of social prescribing initiatives.	PCNs	Integrated working with Primary Care Networks, statutory partners and the VCSE working together to reduce inequalities	Improved access to appropriate support and unnecessary variations and fragmentation in care.	Increased referrals to the Community Frailty Team
Implement the integrated North Tyneside Frailty Service with two pathways.	Ageing Well Strategy	Residents experiencing falls and frailty have support from a 'one stop shop' and an integrated care service	Fewer residents will be discharged from hospital directly into permanent residential/nursing care	Reduction in delayed transfers of care
Backworth Ageing Well Village development to continue and integrated services to be established to prevent unnecessary hospital admissions and premature admissions to long-term care	Adult Social Care	Residents have improved access to technology and are more digitally included.	Demand in the acute sector is well managed and the gaps in care which have the most impact on health inequalities have reduced	Reduction in hospital admissions; Reduction in hospital re-admission rates; Increased referrals for social prescribing
Adult social care will increase the use of technology within the homes of residents with social care needs to enable people to live more independently.		Care home residents and other vulnerable groups are supported to receive COVID booster vaccinations in line with current JCVI recommendations	Health inequalities are considered in all policies across health and social care and the work of the Health and Wellbeing Board partners	Reduction in patients breaching 18 week waits for hospital treatment; Reduction in average length of stay in hospital and intermediate care settings
All partners continue to work together to support delivery of the COVID-19 booster vaccination programme to ensure good uptake overall and reduced inequalities	All Partners	BCF and iBCF continue to meet local and national priorities	Organisations work together at scale to share planning and pool resources to work sustainably and address financial pressures that can be a barrier to providing health and social care	Reduction in prescribing rate of medicines that can cause dependency, antimicrobial medication and medicines of low value
Northumbria Healthcare Trust will continue to work with key partners to deliver their Community Promise	Northumbria Foundation Trust			Increased proportion of people who receive short term (enablement) service in year with an outcome of no further requests for support **or** increase in over 64s discharged to their usual place of residents (examples from Rotherham and elsewhere)
Promoting the services of community pharmacy to support our local communities.				**Community mobilising community assets**
Strengthening public, patient and carers 'voices at place to shape integration, working with a range of partners such as Healthwatch, the VCSE sector and experts by experience	VCSE			Participatory engagement methods where community members are actively involved in design, delivery and evaluation of integrated services 'Ageing Well Village'
Addressing workforce challenges e.g., recruitment, retention, and retirement by working together to ensure a strong and sustainable workforce for the future	All partners			Link to all priorities and impact areas across the strategy

Equally Well Implementation Plan: Our Indicators

The Equally Well Implementation Plan sets out how we will turn the vision and ambitions into real outcomes in the short and longer term for our residents. We need to know if our approach and strategic ambition is making a difference.

It is widely acknowledged that it is difficult to monitor effectiveness of interventions to reduce health inequalities because of the complex range of factors that contribute to change. All partners acknowledge that major change will not happen overnight, so we will be seeking gradual improvements in these indicators

The high-level measures a population level are the overarching indicators that will be monitored are set out in Table 1

It is proposed that progress on each of 7 key impact areas be provided to the Health and Wellbeing Board at regular intervals plus an overall annual progress report and a refresh of the implementation plan. A proposed forward plan is outlined in table 2 below. The partnership Chairs responsible for each impact area will coordinate the compilation of the report. This reporting will supplement the dashboard with localised knowledge, service data and case studies. This will help the Health and Wellbeing Board to understand in the short to medium time the impact of the interventions in the implementation plan.

We will also measure our progress by focusing on the impact that the strategy will have on people's lives and case studies and residents' experience will supplement the quantitative data below.

Table 1: Overarching indicators: high level measures of health inequalities

Overarching indicators
Male life expectancy at birth
Female life expectancy at birth
Healthy life expectancy – male
Healthy life expectancy – female
Infant mortality
Life expectancy gap between most and least deprived areas - Male
Life expectancy gap between most and least deprived areas - female

Table 2: Indicators to monitor progress across each of the 7 impact areas:

*= overall figure for borough and also by ward/PCN/locality etc

Best start in life
- Smoking in pregnancy (SATOB/SATOD, partners smoking)*
- Breastfeeding rates (delivery, 48hrs, day 10, 6 weeks)*
- Children who receive a good level of development at the end of reception*

Maximising capabilities of children, young people and adults
- Educational attainment (overall, by ward and by FSM eligibility)
- Attendance and exclusions (overall, by ward and by FSM eligibility)
- Percentage of 16-18 year olds NEET (link to 'fair employment')
- Hospital admissions as a result of self harm (10-24 years)
- Apprenticeship and destination data
- Adult learning completers in education/employment

Fair employment and good work for all
- NEETs at age 18-24*
- Proportion of adults who are unemployed*
- Number of long term claimants of JSA
- Proportion of employed adults earning the Living Wage
- Disability employment gap
- Rates of sickness absence across North Tyneside

Ensure healthy standard of living for all
- TBC, but indicator relating to schools running the poverty proofing programme and/or HAF and/or food bank usage

The places and communities we live in and with
- TBC, but measure of child poverty and/or low income households, crime rates (ASB), access to parks/beaches etc
- Proportion of residents feeling safe in their communities
- Proportion of residents experiencing social isolation
- Proportion of residents experiencing digital inclusion/isolation
- Number of affordable housing units developed
- Number of energy efficient improvements made in the private sector

Our lifestyles and healthy behaviours
- Smoking prevalence (overall, by ward, hospital inpatients)
- Alcohol-related hospital admissions (adults and under 18s) *
- NCMP indictors*
- Physical activity in hospital inpatients
- Uptake of screening programmes*
- Drug Related Deaths* and unmet need

An integrated health and care system
- Delayed transfers of care
- Hospital admissions (over 64s?)
- Hospital readmission rates
- Referrals for social prescribing
- Patients breaching 18 week wait
- Average length of stay in hospital and intermediate care settings
- Prescribing rate of medicines that cause dependency, antimicrobial medication and medicines of low value
- Indicator linked to short term reablement or discharge to usual place of residence
- TBC - but could include referrals to Community Frailty Team