

May 2023

Blackburn with Darwen Joint Local Health and Wellbeing Strategy 2023 – 2028



Health &
Wellbeing
Board

Start well | Live well | Age well | Dying well

Foreword by Cllr Damian Talbot

On behalf of Blackburn with Darwen Health and Wellbeing Board I am delighted to introduce this Joint Local Health and Wellbeing Strategy for the Borough, which sets out our local priorities for improving health and wellbeing over the next five years.

Blackburn with Darwen is a diverse and vibrant borough that has seen significant business and commercial investment over recent years. With a strong industrial heritage; artistic and creative talents and a reputation for entrepreneurship, the borough has a lot to offer its residents, businesses, investors and visitors.

The borough's biggest asset is its people, from passionate and hardworking residents who play an active role in improving their area; to a strong voluntary sector dedicated to supporting people and public service delivery, and a socially conscious business community, committed to transforming the towns and improving prospects for local people.

This Joint Local Health and Wellbeing Strategy for Blackburn with Darwen comes, however, at a time of global economic challenge, during which our borough continues its recovery from the significant impacts of the Covid-19 pandemic. Like many other areas, the Borough faces a number of significant challenges including low household income, a legacy of poor housing conditions, below-average health outcomes and a high proportion of residents claiming incapacity benefits, as well as reductions in public sector funding.

The Blackburn with Darwen Health and Wellbeing Board is committed to addressing and tackling these challenges, and with this strategy comes the opportunity to take action and accelerate us towards our vision of creating a healthier, safer and fairer Blackburn with Darwen where everyone benefits from sustained improvements in health and wellbeing.

To make progress, it is crucial that we continue to work closely together as a local health and care system, seizing the opportunities this brings for our borough in furthering our ability to harness effective collaboration and drive integrated delivery. We will encourage and expect all organisations to use the Joint Local Health and Wellbeing Strategy when considering actions to improve health and wellbeing and when making decisions about spending money and planning services over the next few years. We all have a role to play in making Blackburn with Darwen a resilient, healthy and thriving place.



A handwritten signature in black ink that reads "Damian Talbot".

Cllr Damian Talbot

Chair of the Blackburn with Darwen Health and Wellbeing Board

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Section 1: Blackburn with Darwen Health and Wellbeing Board

Health and Wellbeing Boards were established by the Health and Social Care Act 2012. More recently, the Health & Care Act 2022 strengthened and clarified the role of Health and wellbeing Boards in relation to newly established Integrated Care Systems. The purpose of the Health and Wellbeing Board is to lead and coordinate local collaborative efforts to improve health and wellbeing outcomes and reduce health inequalities. We strive to do this by working together to overcome complex health and wellbeing challenges that cannot be solved by a single organisation in isolation.

Blackburn with Darwen's Health and Wellbeing Board brings together leaders from across the local health, social care and the wider system, including:

- Blackburn with Darwen Council, including public health, adult and children and young people's social care
- Local elected members
- Lancashire and South Cumbria Integrated Care Board
- East Lancashire Hospitals Trust
- Primary Care
- Lancashire and South Cumbria NHS Foundation Trust
- The voluntary and community sector
- Healthwatch Blackburn with Darwen



Section 1: Purpose of the Joint Local Health and Wellbeing Strategy

Vision Statement:

Working together to create a healthier, safer and fairer Blackburn with Darwen where everyone benefits from sustained improvements in health and wellbeing

Our Six Strategy Priorities are:

1. **Best start in life**
2. **Healthy homes, places and communities**
3. **Mental and physical health and wellbeing**
4. **Good quality work and maximising income**
5. **Positive ageing and independence in later life**
6. **Dying well**

A specific function of the Health and Wellbeing Board is to produce a Joint Local Health and Wellbeing Strategy (JLHWS) which details our shared priorities and approach to improving health and wellbeing and reducing health inequalities, over the coming years. This new strategy details our priorities and approach to 2028.

This strategy and the priorities within it have been developed following consultation and engagement with key stakeholders, whilst being underpinned by evidence of needs identified within the [Joint Strategic Needs Assessment](#) and our understanding of what works to create good health and wellbeing.

The Strategy does not seek to list every action undertaken by every partner to improve health and wellbeing. It focusses principally on those actions that can be best delivered together. The shared priorities identified in this strategy will help us to go beyond organisational boundaries and work in creative and innovative ways to improve outcomes for and with local people.

The 2023-2028 JLHWS will be reviewed after one year to ensure alignment with the strategic priorities and activities of our partners. This will ensure that the strategy remains relevant, and that delivery is coordinated and fully embedded across Blackburn with Darwen.

Section 1: Health and Wellbeing Strategy 2019:2023: Our Achievements

Men in Sheds



The Public Health Team have commissioned Blackburn Rover's Community Trust to deliver the Men in Sheds project since 2019. The project aims to bring men together to socialise, make new friends, learn new skills and improve their mental and physical health. They do this by working together to design, develop and improve their growing area within the grounds of Ewood Park, with the project working to the strengths of each individual and finding a role for everyone.

Participants have gone on to join and complete the Community Trust's Community Ambassadors programme, others have found temporary work and one of the participants has become a member of staff at the Community Trust. The group also get involved with the Council's World Suicide Prevention Event, playing a key role in the vigils, raising awareness of suicide and promoting support services.

The Project won a Community Volunteer Award in acknowledgement of the input of participants and the support they provide each other. Men in Sheds meets every Thursday morning and is very welcoming to new members.

Breastfeeding



Blackburn with Darwen became a Unicef Gold Accredited Breastfeeding Friendly Borough, aiming to create a supportive and sustainable culture around infant feeding.

In partnership with the Local Authority, the Baby Friendly Team led on the journey to become a Breastfeeding Friendly Borough. Work continues to build on the achievements below, implementing interventions that go above and beyond the core Baby Friendly Standards.

- UNICEF Gold Award Revalidation for Maternity Service, Health Visiting Service and Children's Centres.
- Installation of permanent signage supporting breastfeeding mums.
- Increased awareness and support around importance of promoting and protecting breastfeeding.
- Delivery of training to front line staff.
- Instigation of a 'Separation Policy' which promotes keeping mum and baby together in the event of a hospital admittance during the COVID pandemic.
- Promoting and embedding the conversation around colostrum for every baby as their 'first immunisation'.
- Maintaining face to face support for mums where required to ensure breastfeeding can continue.

Section 1: Health and Wellbeing Strategy 2019:2023: Our Achievements

Oral Health



In response to ongoing high rates of tooth decay among children, a local Partnership Oral Health Improvement Strategy was launched, with an ongoing action plan being implemented. New priorities are being developed to build upon the following progress and achievements to date:

- Significant reduction in the rate of decayed, missing or filled teeth among five year olds from 51% to 40% with the rate moving down from highest to 5th highest in England.
- Commissioning of a supervised toothbrushing service.
- Madrassah pilot to determine why South Asian children are significantly more likely to have decay.
- Give Up Loving Pop (GULP) lesson delivered to 60 primary school classes.
- Oral Health campaign displaying the four winning posters from a primary school competition across the Council's advertising assets.
- Kind To Teeth parent champions training – 26 champions have been trained since 2021.
- Start Well, Live Well and Age Well oral health improvement training delivered to over 120 key staff across the Borough.
- Local actor book reading of Dental Nurse and Max's Not So Sweet Dream delivered at 40 oral health primary school assemblies.
- Lift The Lip in primary care – nurses in the North West are being trained in lifting the lip of children during routine doctor appointments to identify early signs of decay and offer appropriate advice.

Covid Winter Grant

The Council received a total of £1,364,724 between December 2020 and July 2021, with a further extension to the end of September of £607,967. This grant has been used to provide food, support for utility bill payments, boiler servicing and repairs, white goods and other essentials to families with children and other vulnerable households directly impacted by the COVID-19 pandemic.

Along with the Council, a total of 17 partners have supported the delivery of the grant across every locality and community in BwD.

Local partnerships have strengthened, expanding the ability to respond to the needs of the community.

 Food & Bills
£1,116,503

Helping
31,627
individuals 
Equivalent spend £35 per person

 Essentials
£130,000

Helping
2578
individuals 
Equivalent spend £50 per person



Section 2: Principles of the Joint Local Health and Wellbeing Strategy

These principles outline the key considerations that the Health and Wellbeing Board will apply to planning, delivering, and evaluating our priorities.

Action on the wider determinants of health

Our health is heavily determined by the places and communities in which we live, work and play. All aspects of our everyday lives have an impact on our health and wellbeing including;

- **our surroundings – clean air, access to green space and leisure and play opportunities**
- **education and skills – qualifications link strongly with life expectancy**
- **housing - affordable, warm and stable, well connected to community, work and services**
- **the food we eat – accessible, affordable and healthy**
- **money and resources – enough to have a sense of control and enable healthy choices**
- **transport - accessible, efficient, sustainable and encouraging of active travel**
- **family, friends and communities – happy childhood experiences, good family life with strong social connections**
- **good work – jobs that are supportive, stable, secure, fairly paid and safe**

A healthy place is somewhere that understands how health is shaped by these factors, and takes action on improving them for current and future generations. To achieve this we have created a Strategy that includes actions for improving health both within health services and much more widely.

Health inequalities

Health inequalities refer to the avoidable, unfair and systematic differences in health between different groups of people, depending on factors such as where people live, their personal characteristics such as gender and ethnicity, and social factors such as income.

These health inequalities influence how long we live and more importantly, how long we live in a state of good health, without the onset of limiting health conditions.

The term 'health inequalities' is used throughout this Strategy and forms a key part of designing and implementing our health policies and interventions to ensure they are equitable.

Ensuring health equity

Support and services need to be tailored to the needs of the different groups and communities in Blackburn with Darwen to ensure that everyone has the same opportunities for good health and wellbeing. For example, people with long-term conditions living in more deprived areas need higher levels of support and different services to obtain the same level of control of their long-term conditions as someone living in a less deprived area.

To effectively tackle health inequalities and address unequal opportunities for good health and wellbeing, services need to be resourced and delivered at a scale and intensity that is proportionate to need and accounts for disadvantage. We are committed to this principle as the Health and Wellbeing Board.

Section 2: Principles of the Joint Local Health and Wellbeing Strategy

Communities driving change

The voice and experiences of the public are critical to the work of the Health and Wellbeing Board and we are committed to ensuring that our local population is at the forefront of our decision making. Over the course of this strategy we will prioritise and improve the way in which we work with our communities, as equal partners, to develop and deliver our plans.

This includes close work with our rich and diverse Voluntary and Community, Faith and Social Enterprise (VCFSE) sector who are essential and valued partners in our ambitions for supporting population health and reducing health inequalities.

Intelligence and evidence based decision making

We will ensure that decisions are made with robust intelligence and will amplify the use of our [Joint Strategic Needs Assessment](#), along with community intelligence and experience, to help us understand the needs of our population. Gathering intelligence is the role of all partners and we will collaborate widely when gathering knowledge and information. This will allow us to target our work where it will make the most difference, and help guide informed decision making that will improve the health outcomes of our communities.

Coordination at place and service integration

This Health and Wellbeing Strategy will be owned and driven by all partners working across the Blackburn with Darwen health and care system. Many multi-agency partnerships and networks already operate in Blackburn with Darwen, with the potential to influence the wider determinants of health and the health and wellbeing outcomes for our population. All these partnerships will have a part to play in contributing to the success of the Joint Local Health and Wellbeing Strategy.

The Joint Local Health and Wellbeing Strategy will not duplicate the work of existing strategies and in the same way, the Health and Wellbeing Board will not duplicate the work of existing partnerships. The Strategy and the Board will help to convene, galvanise, and support a well-connected system that can make a lasting impact on improving outcomes and reducing inequalities.

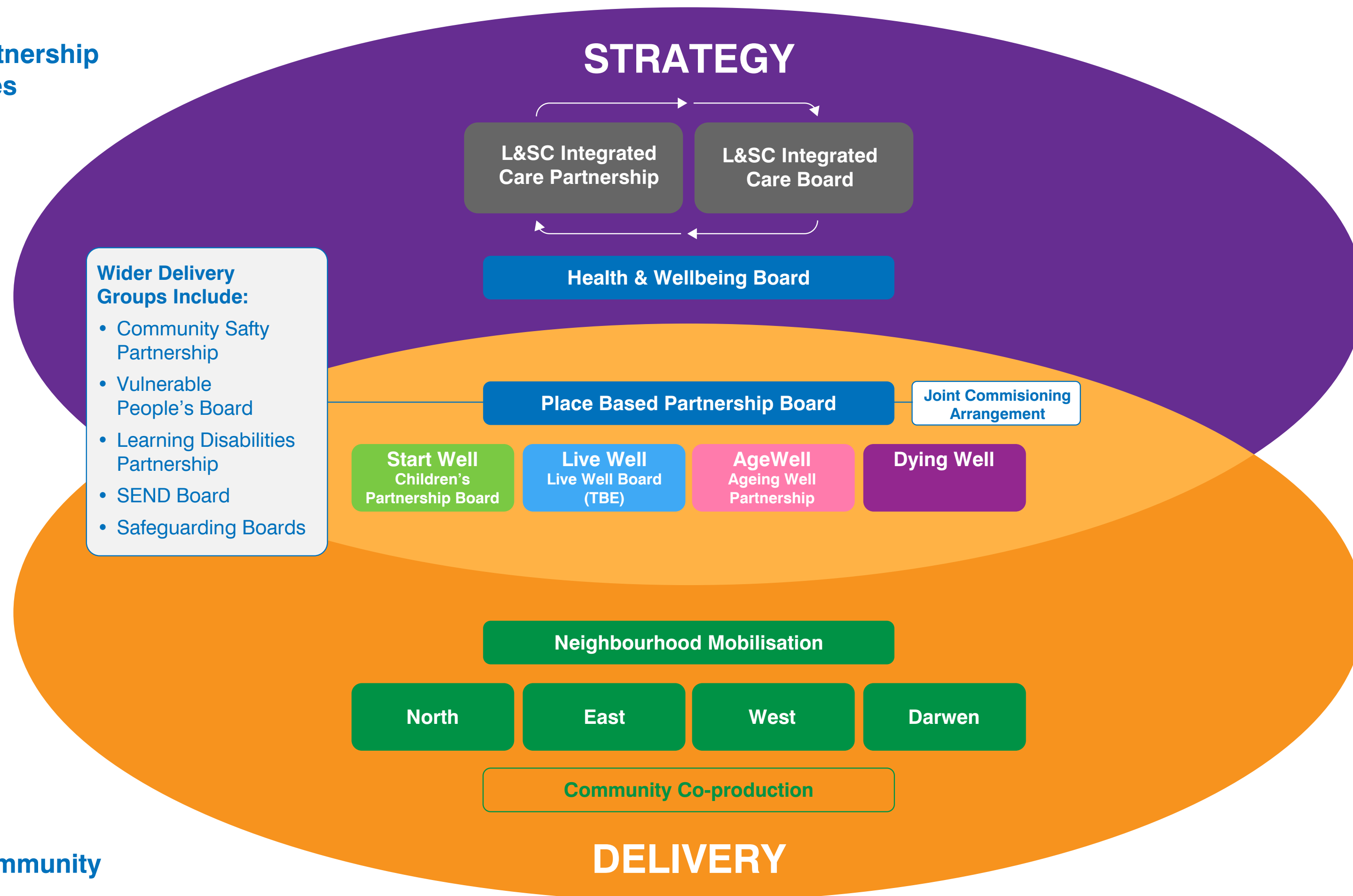
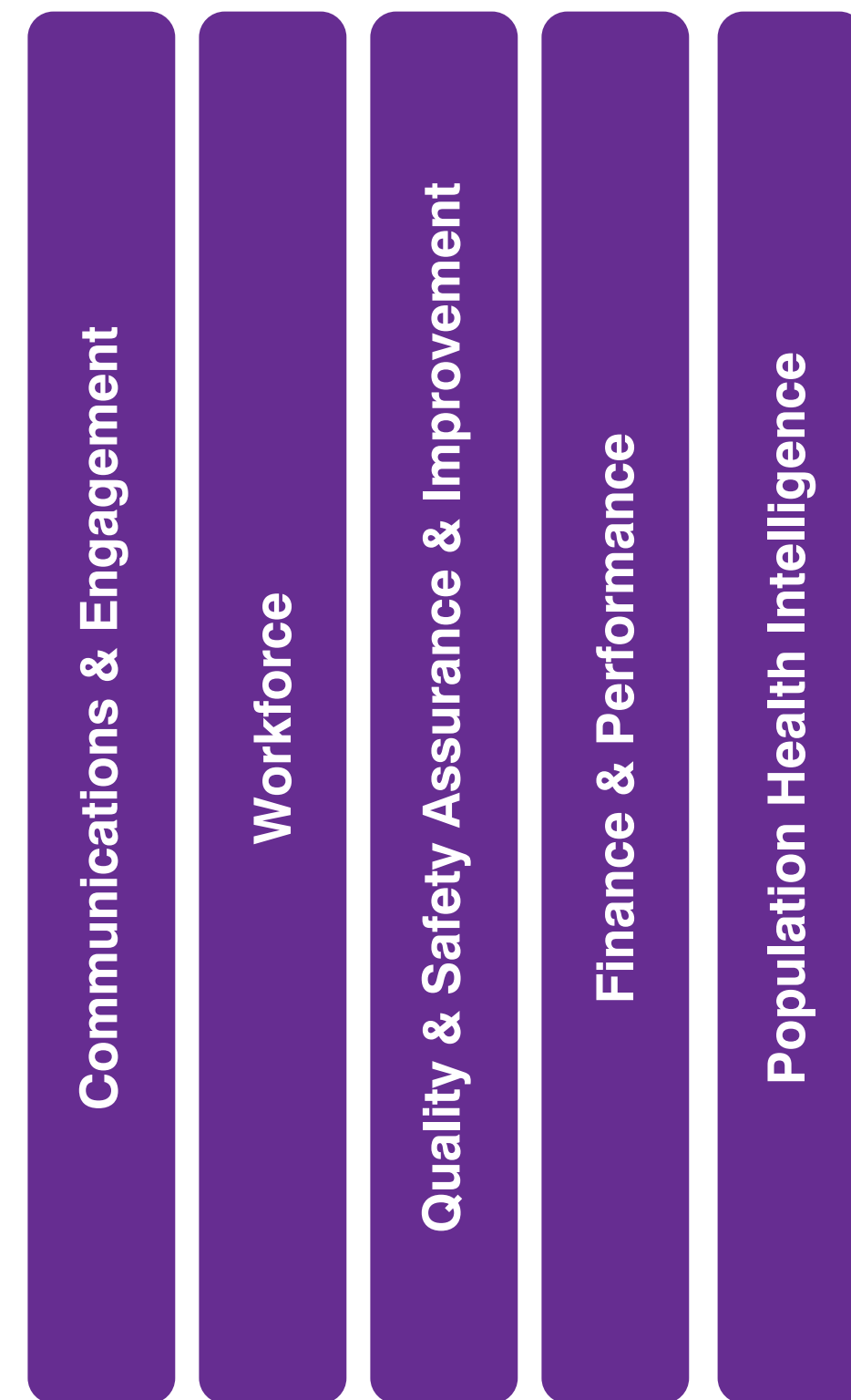


Section 2: Principles of the Joint Local Health and Wellbeing Strategy

Blackburn with Darwen Place Based Operating Model:

The model below visualises the partnership working involved in the delivery of the Joint Local Health and Wellbeing Strategy and the delivery of health outcomes to improve the health of residents and reduce inequalities across the region.

How will we drive delivery as a Partnership and ensure assurances of outcomes



- Wider Delivery Groups Include:**
- Community Safty Partnership
 - Vulnerable People's Board
 - Learning Disabilities Partnership
 - SEND Board
 - Safeguarding Boards

We will work together to ensure community co-production wherever we can

Section 3: Our Health and Wellbeing Strategy on a Page

Blackburn with Darwen Joint Health and Wellbeing Strategy 2023 - 2028

Our Vision

Working together to create a healthier, safer and fairer Blackburn with Darwen where everyone benefits from sustained improvements in health and wellbeing

Our Principles

Action on the wider determinants of health

Ensuring health equity

Communities driving change

Intelligence and evidence based decision making

Coordination at place and service integration

Our Priorities

Best start in life

Healthy, homes, places and communities

Mental and physical health and wellbeing

Good quality work and maximising income

Positive ageing and independence in later life

Dying well

How we will deliver our priorities

Start Well
Start Well annual action plan

Live Well
Live Well annual action plan

Age Well
Age Well annual action plan

Dying well
Dying Well annual action plan

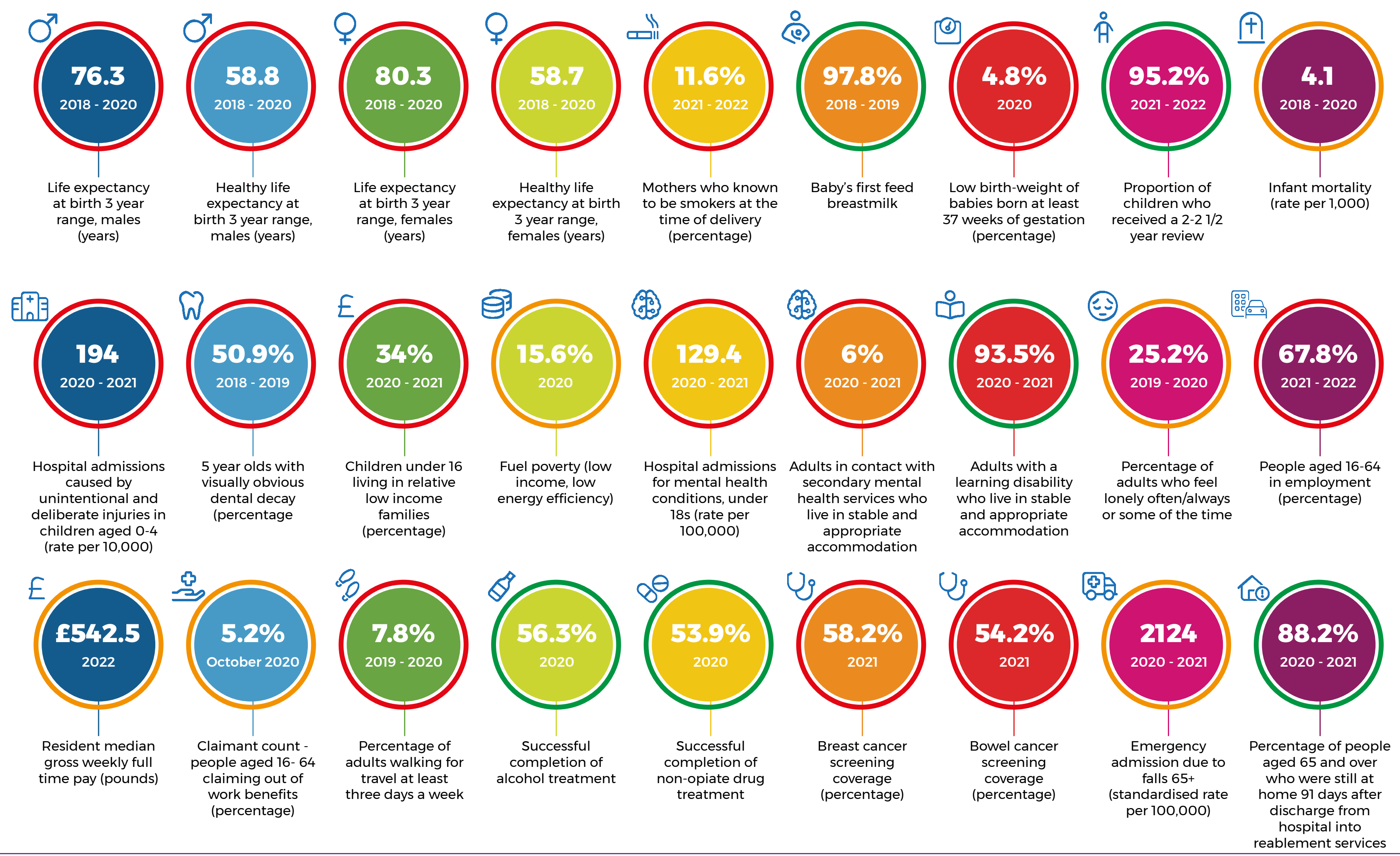
Pennine Heathy Equity Alliance

Blackburn with Darwen Place Based Partnership

Primary Care Neighbourhoods

Monitoring

Section 3: Key Facts at a Glance



Priority 1: Best start in life

Why best start in life is a priority

Giving every child the best start in life is crucial to reducing health inequalities across the life course. Good health starts in the womb. What happens there, and as the brain and body develop through the first two years, has a lifelong impact on factors including obesity, success at school and even wealth in later life. Children suffering stressful events such as abuse, neglect, violence or substance-misuse are more likely to have unhealthy lifestyles and mental and physical conditions as adults, leading to early death. When we put resources into the wellbeing of children young people, it pays off more than spending later in life. This is the time to make every day count with education, services, support and high quality opportunities for parents, children and young people.

Where are we now?

- The overall health and wellbeing of children in Blackburn with Darwen is worse than the England average, including numbers of children killed or seriously injured on the roads, low birth weight of babies, school readiness and speech and language development.
- Particular areas of strength include breastfeeding rates at birth, children being a healthy weight at Reception age and rate of attendance at accident and emergency (0-4 years old).

What we will do to address the health inequalities

We will enable our children to have the best start in life by taking a targeted approach to tackling health inequalities and vulnerabilities, and ensuring that all of our children and families have the opportunity to achieve positive health outcomes.

- Develop Family Hubs to enhance our integrated support to families and enhance our digital integration between services to enable better data sharing.
- Further develop our Start for Life offer, co-designed with parents and families, including maternity services, school nurses and education, with a focus on mental health and wellbeing, antenatal support, infant feeding and health visiting (through the Healthy Child Programme offer).
- Improve school readiness, including supporting new parents, creating positive home learning environments and introduction of the Balanced System model to improve speech and language provision across the borough.
- Respond effectively to the mental health and wellbeing needs of children and young people through our integrated partnership approach and reduce the incidence and impact of Adverse Childhood Experiences as we work towards becoming a trauma informed borough.
- Develop a local Child Poverty Strategy co-designed with young people to drive our partnership approach to preventing and mitigating the impacts of poverty on children and young people.
- Provide a robust response to the Neglect of children and young people through the delivery of our neglect strategy and through the increase of awareness of neglect and training of partners.

Priority 1: Best start in life

- Improve children and young people’s oral health through the work of the Oral Health Improvement Group and strategy, including supervised tooth brushing; Kind to Teeth parent champions; targeted campaigns, training and awareness for parents, carers and professionals, and provision of toothbrushes, toothpaste and free flowing cups to every child at their 8-12 month health visitor check.
- Increase uptake and continuation of breastfeeding, with a targeted approach for those in our community experiencing the greatest health inequalities and the commissioning of a new specialist infant feeding service.
- Reduce childhood obesity, with a targeted approach for those in our community experiencing the greatest health inequalities, with a particular focus on Year 6 children and the introduction of the Play and Skills at Teatime Activities (PASTA) programme.
- Reduce smoking in pregnancy with a targeted approach for those in our community experiencing the greatest health inequalities.
- Implement our SEND (Special Educational Needs and Disabilities) strategy to ensure that all children and young people with SEND will live happy, healthy and fulfilled lives wherever possible within their local community and have every opportunity to thrive.
- Ensure that looked after children and care leavers are happy and healthy, and receive additional support to access relevant services, for example, regular health assessments and dental health services.



Priority 2: Healthy homes, places and communities

Why healthy homes, places and communities is a priority

Some of our most pressing health challenges, such as obesity, poor mental health, physical inactivity and the needs of an ageing population, are influenced by the built and natural environment. The right home environment is essential to health and wellbeing, throughout life, and there are significant risks to an individual's physical and mental health associated with living in a cold, damp or otherwise hazardous home, or one which does not provide security of tenure. The quality of the built and natural environment can affect connectivity within a neighbourhood and people's social networks, exposure to air and noise pollution, safe and accessible transport and opportunities for active travel. Climate change is the single biggest health threat facing humanity and is undermining many of the social determinants for good health which are disproportionately felt by the most vulnerable and disadvantaged in our community.

Where are we now?

- Significantly lower rates of walking and cycling for travel than the national average
- Almost 10,000 households are living in fuel poverty
- The Borough has a higher than average density of hot food takeaways
- In recent years there has been significant growth and investment in the Borough's economy

What we will do to address the health inequalities

- Establish a local Healthy Homes Partnership to drive improvements in improving health through the home across the system.
- Work to ensure that new housing developments within the borough creates healthy, sustainable and inclusive communities.

- Reduce fuel poverty by improving access to and take up of warm homes advice, support and interventions, targeted at those at greatest risk. Deliver a quality safe and warm homes programme for the borough, including supporting people in fuel poverty and fuel debt through the Affordable Warmth Forum partnership.
- Reduce fuel poverty and improve home safety by increasing awareness of the home and health relationship across the health, social care and voluntary, community and faith sector workforce.
- Ensure all services who visit homes embed safe and warm home service pathway into their delivery.
- Increase the rates of active travel across the borough through delivery of the BwD Walking and Cycling Plan.
- Reduce accidents by delivering the Safer Roads Strategy action plan through the BwD Safer Roads Operational Group.
- Provide a healthier and more sustainable food environment, including access to healthier and more affordable foods, through the work of the Blackburn with Darwen Food Alliance and Eat Well Move More Strategy.
- Support the Council's delivery of the Climate Emergency Action Plan and Climate Adaptation Plan and have oversight of partner and stakeholder action on climate change within their own organisations.
- Ensure our spatial planning policies increase connectivity whilst improving health and wellbeing, air quality and reducing accidents.
- Ensure open spaces and green infrastructure encourage physical activity and support positive emotional wellbeing.
- Build on the assets and strengths of specific communities to enable residents to identify the services and support they need to develop strong and resilient communities.
- Tackle loneliness and isolation and foster positive social connections among children, young people, working age adults and older adults.
- Tackle discrimination, racism and their outcomes.

Priority 3: Mental and physical health and wellbeing

Why mental and physical health and wellbeing is a priority

Preventable deaths, those avoidable through healthy lifestyles or preventative care, are more likely in deprived areas and vulnerable population groups. Three things can have a big positive impact; stopping smoking, a healthier diet, and being more active. These cut the risk of the main causes of preventable death: cancer, lung disease, heart disease, strokes and diabetes. Spotting any disease early improves the length and quality of a person's life.

Mental wellbeing is as important as physical wellbeing: there is no good health without good mental health. Mental health is closely related to many forms of inequality and people who live in deprived areas are more likely to need mental healthcare but less likely to access support and to recover following treatment. COVID-19 has been recognised as a public mental health emergency that increased existing mental health inequalities with differential impacts on a wide range of vulnerable groups. These inequalities are likely to have been further compounded by the cost of living crisis which has followed the pandemic.

Where are we now?

- Prevalence of diabetes is the highest in the North West
- Estimates of obesity levels amongst adults are around the national average
- The rate of deaths from cardiovascular diseases are significantly higher among Blackburn with Darwen residents than the national average
- Prevalence of common mental health disorders, severe mental illness, reported loneliness and hospital admissions for mental health conditions and hospital stays for self-harm are higher than the national average
- The borough has a lower proportion of 16/17 year olds who are not in education, employment or training than seen nationally

What we will do to address the health inequalities

- Deliver a coordinated prevention at scale programme with a focus on health inequalities;
 - Reducing the prevalence of key risk factors for long term conditions including smoking, obesity, alcohol and inactivity
 - Early detection and diagnosis of long term conditions and cancers through increasing uptake of cancer screening and NHS Health Checks
 - Increasing uptake of vaccination and immunisations
- Reduce inequalities by placing a concerted focus on the most vulnerable including people who are experiencing homelessness, asylum seeker and refugees, sex workers and other socially excluded groups.
- Refresh and deliver our Mental Health and Wellbeing and Suicide Prevention Strategies in order to reduce the rate of death by suicide. This will build on delivery of the Prevention Concordat; a plan for Better Mental Health for All in Blackburn with Darwen.
- Develop a Real Time Surveillance model that will support the collaborative use of data in the provision of suicide and self-harm prevention strategies.
- Embed mental health and wellbeing as a core priority across the life-course and in all settings including health, social care, education, criminal justice, children and young people's services, adults, neighbourhoods and voluntary, community and faith sector partners.
- Accelerate our work towards becoming a fully trauma informed borough.
- Tackle loneliness and social isolation among children, young people, working age adults and older adults.
- Use findings from the "Beyond Imagination Life Survey" to influence the development of strengths-based interventions for the people with lowest levels of wellbeing in the borough.

Priority 4: Good quality work and maximising income

Why good quality work and maximising income is a priority

Having a good-quality job is vital to protecting and improving health and wellbeing. The effects of unemployment are linked to high rates of long-term conditions, mental illness and unhealthy lifestyles. Being in work can make people feel useful to society, make families better off, and help to reduce health inequalities, while unstable work and frequent unemployment lowers confidence, leading to poorer mental and physical health. With the lifting of retirement age, we need to ensure that as many people as possible can be supported to live longer working lives.

People with inadequate income are likely to experience poorer quality of life and less opportunity than others. Helping people to maximise their income by being in work, accessing their full lawful entitlements to financial support and managing outgoings and debts helps people become wealthier, healthier, happier and safer.

Where are we now?

- More people are out of work due to a long-term condition than the England average
- Mental health and problems with muscles and bones are the main reasons people claim sickness benefits.
- Council teams and partners take a strength based approach to support residents to support themselves, alongside commissioned debt, benefit and housing advice to support any resident in need.

What we will do to address the health inequalities

- Support young people to feel increased ambition and aspiration, develop life skills, build resilience and encouraging them into professions or sectors with career opportunities and/or recruitment challenges.
- Take action across health and care organisations to increase the number of apprenticeships and other vocational training available, and ensure these are a stable and secure route into a career in health and care.
- Support our working-age population into a stable and healthy work environment, allowing individuals to gain the skills and confidence that enable them to compete for jobs as equals including;
 - Volunteering opportunities as a route to employment
 - Good quality retraining and skills programmes for all adults to adapt to changing job market
 - Support to improve digital skills in the workplace
 - A broad range of employability programmes targeting those from disadvantaged communities and those who suffer inequalities in achieving successful employment
 - More local employers supporting older adults to stay in or return to the work place
 - Support for residents with long term conditions into employment
- Ensure people stay well in work, by developing healthy and supportive work environments that promote health and wellbeing and offer support to individuals where needed.
- Work with large scale organisations and anchor institutions to take a role in contributing to the wellbeing of the population and improving social value.
- Improve access to benefit and debt advice by working closely with our commissioned service and other partners to ensure all residents who need support are able to access at the right time, in the right place and in the right way for them.

Priority 5: Positive ageing and independence later in life

Why positive ageing and independence later in life is a priority

People can now expect to live for longer than ever before, but these extra years of life are not always spent in good health, with many people developing conditions that reduce their independence and quality of life. Supporting people to age better and be healthier longer includes a focus on employment, financial security, housing, the local environment and community and social connectedness, which are all important contributors to health and wellbeing. Age-friendly places can support older people to maintain their independence for longer, improve their quality of life, ensure their voice is heard and reduce demand for health and social care services.

Where are we now?

- Blackburn with Darwen is worse than the England average across a range of indicators for older people, including life expectancy and healthy life expectancy at age 65; rates of hip fractures due to falls, and dementia.
- Since the 2011 census there has been an 18% increase in the number of people aged over 65 living in the Borough and the over 65 population is expected to increase by almost 40% in the next 20 years and the 85+ population by over 80%
- In 2022 the Borough adopted a Positive Ageing Framework, which provides a significant opportunity to shape our borough to approach to positive ageing for all.

What we will do to address the health inequalities

- Embed the Positive Ageing Framework locally to support positive ageing for all.
- Develop a network of positive ageing champions.
- Develop BwD as an 'Age Friendly' place with WHO accreditation.
- Increase the number of adults meeting minimum physical activity recommendations to maintain physical independence.
- Build a confident and knowledgeable workforce who understand the impact of ageing on health and the positive, strength based ways to respond to this.
- Integrate self-care, healthy lifestyle and positive ageing messages into all appropriate interactions.
- Develop and deliver a system wide Dementia Framework for Blackburn with Darwen.
- Support people living with dementia and their families to live well and be independent for as long as possible.
- Develop and deliver a system wide Falls Prevention strategy for the Borough to support independence and reduce the number of hospital admissions due to falls.

Priority 6: Dying Well

Why dying well is a priority

Poor end of life care and planning hugely impacts families and friends who suffer and find not knowing end of life arrangements stressful, hard work and difficult emotionally, as well as health and care partners, local authorities and local community organisations who may end up dealing with a person's matters that they sadly know little about. It is our aim for the adults, children and young people of Blackburn with Darwen to live well, before dying with peace and dignity, in the place where they would like to die, supported by the people important to them.

We also recognise that the loss of loved ones, whether anticipated or sudden, can have a significant and long-lasting impact of individuals, families and communities. We aim for those affected to be able access to excellent bereavement support to build the skills and confidence of our communities.

Where are we now?

- More people die in hospital than in any other place and this is higher than the England average
- There are significantly less people dying in care homes compared to the North West and England average
- Fewer people are identified as being at end of life in primary care, than in Lancashire and South Cumbria and in England as a whole

What we will do to address the health inequalities

- Engage with communities to inform our approach to end of life planning and bereavement support considering the differing requirements of our communities and how we can best we can support these.
- Normalise conversations around end of life and planning for end of life by raising awareness of talking about dying with the public through community campaigns.
- Develop and deliver our local approach to end of life planning for our residents and build capacity through a network of End of Life Champions.
- Support people to complete advance and emergency care plans with their loved ones and the professionals who are supporting them.
- Working with our partners across Lancashire and South Cumbria to gain a full understanding of bereavement support availability and capacity across and ensure that our residents have improved access to this support.
- Develop and implement a Bereavement Improvement Plan to develop knowledge, skills and confidence with our communities.

Delivering our priorities

The Health and Wellbeing Board will oversee the Strategy and receive updates on its progress. Lead groups will take ownership of delivering priorities and wherever possible these have been identified from existing groups already in place. This includes a number of multi-agency Life Course Boards (Start Well, Live Well and Age Well) that report directly to the Health and Wellbeing Board.

Detailed action plans will be developed setting out practical steps to convert our priorities into short, medium and longer-term actions that can be implemented to achieve improvement. This will include taking further work that we have already started. Through the local Place Based Partnership, the health and social care system will design services centred around the needs of citizens, contributing to the overall success of this Strategy.

