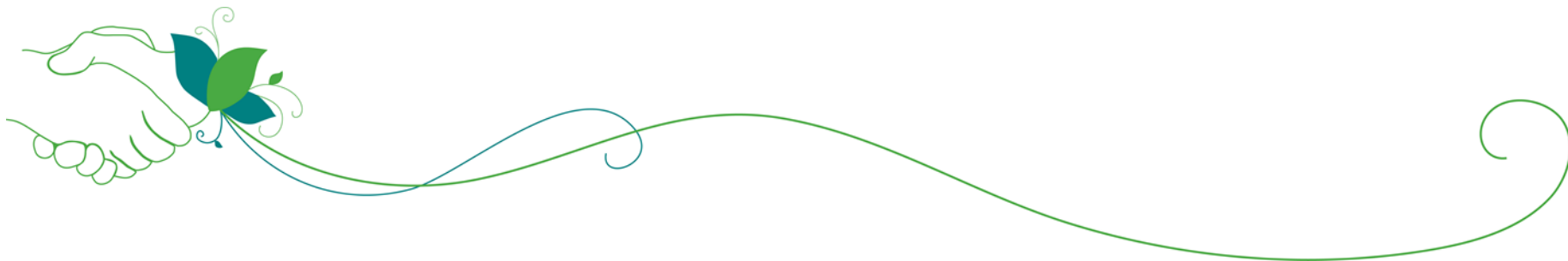


DAVENTRY DISTRICT COMMUNITY STRATEGY

A PARTNERSHIP PLAN FOR OUR DISTRICT 2017 – 2020



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FOREWORD

As Chair of the Local Strategic Partnership (LSP) I am delighted to be able to write an introduction for our new Daventry District Community Strategy. The LSP is fifteen years old this year, and this strategy presents our latest view of the work we will undertake in the District to try to improve the quality of life for our residents.

The political and economic backdrop against which this strategy has been developed continues to be challenging, but I am confident in the relationships we have between organisations from the public, private and voluntary sectors in Daventry District. We will continue to try to make a difference locally, whatever the regional, national or international context.

This community strategy, however, acknowledges the context within which we are operating; this strategy is much more focussed than previous strategies. This has been done intentionally in order that our partnership can put resource into making a significant difference in specific areas.

Our focus is on the quality of life for the residents of Daventry District and trying to deliver benefits from working in partnership. This strategy provides an overview of our work.



Carella Davies
Chair, Daventry District Local Strategic Partnership

WHAT IS THE LOCAL STRATEGIC PARTNERSHIP

The Local Strategic Partnership was formed in 2002 to bring together representatives from public, private, community and voluntary agencies to work together to make life in the district better. Partners recognise that we can achieve far more by working together than as individual organisations, by identifying and delivering shared aims and priorities.

The work of the partnership is overseen by the LSP Executive. The purpose of the Executive is to set the direction for the partnership and ensure there are clearly identified priorities for the partnership to follow.

The Health and Well-being Forum takes responsibility for ensuring the direction set by the Executive is turned into actions.

Membership of the partnership is reviewed regularly to ensure it is fit for purpose.

Membership of the partnership includes:

- Bromford Housing
- Citizens Advice Daventry
- Daventry District Council
- Daventry and District Forum
- Daventry Town Council
- Daventry Volunteer Centre
- Everyone Active
- Futures Housing
- Daventry Food Bank
- Jobcentre Plus
- Nene Clinical Commissioning Group
- Northamptonshire ACRE
- Northamptonshire County Association of Local Councils
- Northamptonshire County Council
- Northamptonshire Police
- Northamptonshire Fire & Rescue Service
- Northamptonshire Healthcare Foundation Trust
- First for Wellbeing
- Public Health – Northamptonshire County Council

OUR COMMUNITY STRATEGY

The Daventry District Community Strategy sets out the priorities for the Local Strategic Partnership (LSP) for the next two years. This 2017 strategy builds on and refreshes the 2014 version. Priorities are being set for two years so that the delivery stage can be maximised by avoiding trying to go through a commissioning cycle of Analyse, Plan, Deliver, Evaluate within the one year.

This strategy identifies how we want the district to change for the better and how the partnership will work together to achieve this. It contributes to meeting the social, economic and environmental needs of the district, helping to improve the quality of life for local people, both now and in the future.

It is impossible to include everything, especially in these difficult financial times, so we have identified a group of priorities which we think are the most important in the current circumstances for the LSP to focus on. These priorities were identified through residents' surveys and the review of statistics and data from a range of sources including LSP partners.

Since the last community strategy was developed the Health and Well-being Forum has become the forum capable of driving delivery of priorities on behalf of the LSP.

This Community Strategy has a focus on health and well-being, a focus on the well-being of residents in the district, a focus on what we, as a partnership of organisations, can do to help our residents. However, this is not designed to be exclusive. It is important to recognise that well-being is itself embracing of wider economic and environmental objectives that the LSP has promoted since inception, and still does. This continues to give supporting context to individual partners who are able to give extra priority to those.

OUR VISION FOR THE DISTRICT

Following consultation with partners, the vision for Daventry District is:

“Daventry, a District where working together will help add years to your life and life to your years”

This vision articulates our ambition that, not only will people live longer but their lives will be filled with opportunities for growth, fulfilment and activities.

The partnership will focus on the overall well-being of the district - social well-being, economic well-being, environmental well-being – to ensure the vision is achievable.

In order to monitor this, a basket of ten key indicators will be used by the partnership to gauge well-being:

Life expectancy at birth - Years, male (Annual figure)

Life expectancy at birth – Years, female (Annual Figure)

Number of early deaths (cardiovascular) (rate per 100,000). (Annual Figure)

Obese children (% school children in Year 6 (age 10-11))(Annual Figure)

Hip fractures in the over 65s (rate per 100,000)

Total Recorded Crime

Footfall in the town centre (average weekly flow).

New business registrations

Key Stage 4 GCSE's A*-C in English and Maths.

Affordable homes delivered to meet the growing need (number).

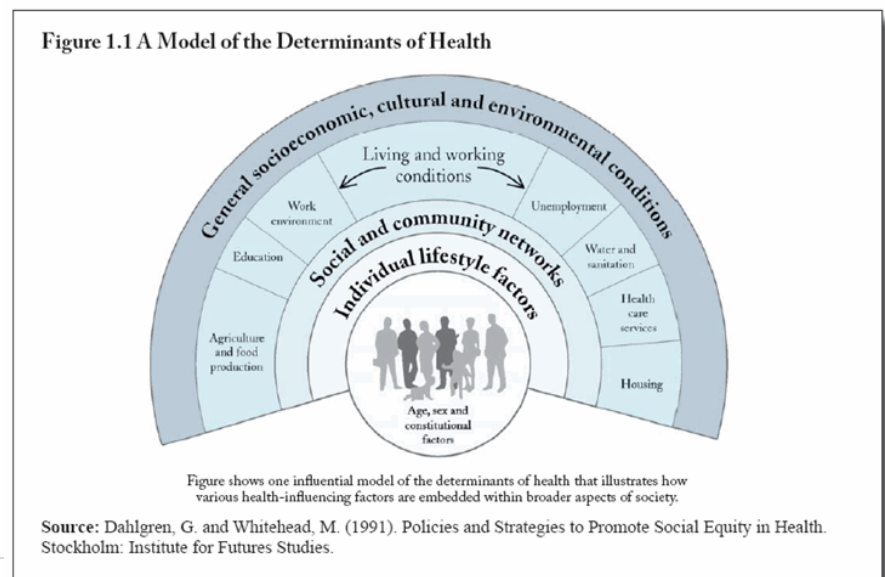
HEALTH & WELL-BEING

When thinking about or discussing health and well-being, many will automatically think of health services such as hospitals, pharmacies and our local GP. However, while these are important, it is widely accepted that there are a much broader range of factors which have an even greater influence on our health and well-being. These range from very individual factors such as our age and gender, through to the lifestyle choices we make or the opportunities we get, which are in turn influenced by the circumstances and environments in which we grow up and live our lives.

These factors are often referred to as 'determinants of health' and include:

- Individual characteristics - which are often beyond our control, such as our age, gender and genetic makeup.
- Lifestyle factors or choices – such as whether we smoke, what we eat, how active we are and how much alcohol we consume.
- Social networks and community – including families, friends and wider social circles of groups and individuals.
- Wider social and environmental factors – such as housing conditions, access to employment, skills and training, quality of the local environment, pollution, crime, availability of healthy food, transport and access to health services, cultural norms etc.

The broad range of factors which influence our health and well-being are represented in Figure 1.1:



Through this, it is possible to see how other factors, such as the focus on housing growth and regeneration of Daventry town centre, align with the health and well-being agenda.

Daventry District has been, and continues to be an area of significant housing growth. This growth presents both challenges and opportunities. Daventry town and some rural communities will grow, but for the most part, the charm and tranquillity of our countryside and villages will be maintained. Building sustainable communities with appropriate transport links, access to greenspace, employment opportunities and other services will impact on residents' health and well-being.

The vision for Daventry town encompasses a vibrant town centre that complements its built heritage and new housing developments which will be interlaid with a network of green spaces and be supported by improved community facilities. Daventry District Council is working to develop an improved shopping and leisure experiences, including a proposal for a Waterway park and associated canal arm. This provides a complementary vision to that of the LSP.

EVIDENCE

In order to identify immediate priorities, a partnership workshop was held. In preparation for the workshop various documents were examined in order to focus down on key issues for the District. Four particular examples were:

The **Older People's Needs Assessment** identified there are 14,700 residents of Daventry aged 65 and over, making up 18.7% of the district's population.

- Life expectancy from birth in the district is 79.5 years for male residents, 83.5 for females. Daventry has seen a decline in life expectancy for both males and females.
- The biggest increase in the 75 and over living alone population is expected to be in Daventry, where the projection is for the population to almost double from 3,087 to 6,059 in 2030.
- Rates of dementia in 65-84 year olds are predicted to increase at a faster rate than England and the East Midlands comparators, particularly in Daventry and South Northamptonshire.

The **Public Health Outcomes Framework (PHOF)** identified the following as significant for Daventry District

- KSI
- Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years)
- Emergency hospital admissions for intentional self-harm
- Injuries due to falls in people aged 65 and over (Female)
- Chlamydia detection rate (15-24 year olds) (Persons)

The **Public Health Profile for Daventry District 2016** identifies the following as key indicators for the district.

- GCSEs achieved
- Smoking status at time of delivery
- Hospital stays for self-harm

- Killed and seriously injured on roads

The **Daventry District Residents Survey**, undertaken towards the end of 2016, asked the residents of the district their views on a broad range of topics. Within this survey there were two questions which asked residents to identify what they felt was important and what most needed improvement.

- *What are the top five most important things making somewhere a good place to live?* Residents were asked to vote for their top five priorities in relation to factors which make somewhere a good place to live. As residents were asked to identify their top five priorities in a numerically ranked table the responses were weighted in order to give more prominence to the first response than the second response and so on.
- *What are the top five things that most need improving in Daventry District?* In this section residents were asked to vote for their top five priorities in relation to what most needs improving in Daventry District. Once again, these responses were weighted.

The result of the document analysis was the identification of possible areas which the partnership could usefully adopt as priorities. Childhood obesity, educational attainment, well-being in young people, children in need, social isolation, falls prevention, and dementia were all identified as possible priorities due to specific issues within Daventry District.

Workshop

A workshop comprising members of the LSP Executive and Health and Well-being forum was held to establish the priorities for the next two years. As part of this workshop, those taking part were told to pay particular attention to the following aspects:

- a) How much of a priority is this factor for residents?
- b) How much do residents think this factor needs improving?
- c) Can the LSP make any difference in relation to this issue?
- d) Does this factor involve more than one partner organisation?

KEY PRIORITIES

The partnership workshop identified the following as the priorities for the Daventry District Local Strategic Partnership for 2017 -2019.

- Educational Attainment
The partnership needs to focus on the inputs and outputs – those preparing for their educational careers, early help, family support, etc. and also (at the other end) making sure the links are there for post-education opportunities - “pathways to employment”
- Healthy lifestyles
This priority stemmed from a conversation about childhood obesity, but was changed in order that there would be no stigmatisation brought about through any project relating to this theme.
- Social Isolation
This focusses on older people, and was to include areas such as mental health and falls prevention.
There should also be a focus on adolescents, making sure there are appropriate opportunities for younger people to be connected.

Following discussions with representatives from partner organisations about the potential overlaps within these areas there are now two priorities for the partnership:

- 1) A New Approach To Working With Vulnerable Adults**
- 2) A New Approach To Working With Pre-School Children**

It is anticipated that the broad nature of these priorities, whilst deliberately people-centric, will foster involvement of many organisations championing people, place and prosperity.

MAKING IT HAPPEN

The priorities contained in this strategy are the shared priorities of the Local Strategic Partnership. Priorities should be reflected in partners' service and action plans and partners should develop initiatives either individually or in partnership with others in order to deliver outcomes for people and communities. The LSP will monitor and review partner activity in relation to agreed priorities and will use its influence to steer and maximise the use of resources.

Two "collaboratives" will be established to deliver this work, one for the work with older people, one for the work with younger people. These collaboratives will particularly include any organisations who are working in Daventry District with pre-school children or vulnerable older people, in an attempt to establish relationships, identify duplication, spot and fill gaps and ensure more effective and efficient ways of working.

The two collaboratives will report into the Health and Well-being Forum, itself accountable to the LSP Executive.

Further information on the role of the LSP and on how others can contribute to implementation of the Community Strategy is available from:-

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