

Health and Wellbeing Board

North Yorkshire



Draft for consultation

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Foreword

We can be thankful that, generally speaking, people who live in North Yorkshire enjoy better health than the average across England. Residents also feel North Yorkshire is a good place to live, which contributes to a sense of wellbeing.

North Yorkshire's Health and Wellbeing Board recently completed a Joint Strategic Needs Assessment of the community of North Yorkshire, which confirmed that we are, in the main, healthy. However, there are some people in the county whose opportunities and lifestyles mean that they do not live the long, healthy lives they might rightfully expect.

As partners, the members of the board recognise we must do something about this. As well as seeking to improve everyone's

health and wellbeing, we must address the inequalities that mean people in some parts of the county are likely to live shorter, less healthy lives than others.

This, our first joined up health and wellbeing strategy, is a step towards that goal. We are asking for your thoughts on this draft, in which we propose to focus action on a few priority areas as we develop a bold strategy for improving, together with our communities, the health and wellbeing of the people of North Yorkshire.

Please take this opportunity to give us your views.

Councillor John Weighell,
Chair of North Yorkshire's Shadow Health and Wellbeing Board.



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The Joint Health and Wellbeing Strategy and its purpose

Some communities and locations are healthier places to live than others. Some people have a better sense of wellbeing than others. The amount of income available to people, their living and working conditions, their social and community networks and the lifestyle they live as well as age, sex and hereditary factors all play a part.

The challenge is to make a positive impact on those factors that can be influenced to improve the health and wellbeing of all people in our communities and at the same time bridge the gap where there are health inequalities. The purpose of this strategy is to improve health and wellbeing.



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North Yorkshire's Joint Strategic Needs Assessment

The priorities identified in this strategy were developed from a variety of sources, but key was North Yorkshire's Joint Strategic Needs Assessment (JSNA). The JSNA identified and analysed the current and future health and wellbeing needs of communities within North Yorkshire. It was produced using the knowledge, experience and views of North Yorkshire's people, voluntary organisations and health and social care services.

It tells us North Yorkshire is a relatively prosperous and healthy county compared to the rest of England, although there are local areas of deprivation and poorer health, the two typically being linked.

What we know about North Yorkshire

The health of people within North Yorkshire is generally good compared to other parts of England.

- North Yorkshire is predominantly a rural county with just seven towns that have a population of more than 15,000 people. Two of the seven towns (Scarborough and Harrogate) have populations exceeding 50,000 people. Outside the Scarborough and Harrogate urban areas

and market towns, North Yorkshire is sparsely populated. This leads to challenges in delivering services efficiently in remote rural areas. Access to services can be a challenge for some communities. This requires service providers to think creatively about rural solutions thus reducing further the need for transport.

- The population of North Yorkshire is increasing and ageing with a projected population of 650,400 by 2035, including a predicated increase in aged over 65 years from 125,000 to 160,000 by 2021. The growth is driven largely by people moving in from other parts of the UK, with people nearing retirement and the recently retired forming a substantial part of this movement.
- Despite being relatively prosperous compared to the national average based on overall measures of deprivation, there are pockets of deprivation particularly in the Scarborough and Whitby areas.
- The health of people within North Yorkshire is generally good compared to other parts of England. However, when comparing the life expectancy of the most deprived members of the community to the least deprived there is a clear inequality. Men who live in North Yorkshire's

most deprived communities will die, on average 6.3 years earlier than their least deprived counterparts. Similarly, women in the most deprived communities in North Yorkshire will die, on average 4.6 years earlier than those in the least deprived communities in North Yorkshire.

- Across the life course, there are challenges at every stage including child poverty, inequitable educational attainment, fuel poverty and social isolation.
- Circulatory disease (including heart disease and stroke) and cancers account for the greatest proportion of deaths within North Yorkshire. Cancers are the most common cause of death under the age of 75 years. There are particular challenges for certain conditions due to increasing age (e.g. dementia and stroke) or change in projected prevalence (e.g. obesity and diabetes).

You can see the full JSNA at:

www.northyorks.gov.uk/jsna

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Building our strategy

We know that although chronic disease management is very important in reducing health inequalities, many factors, the wider determinants, effect peoples health and wellbeing.

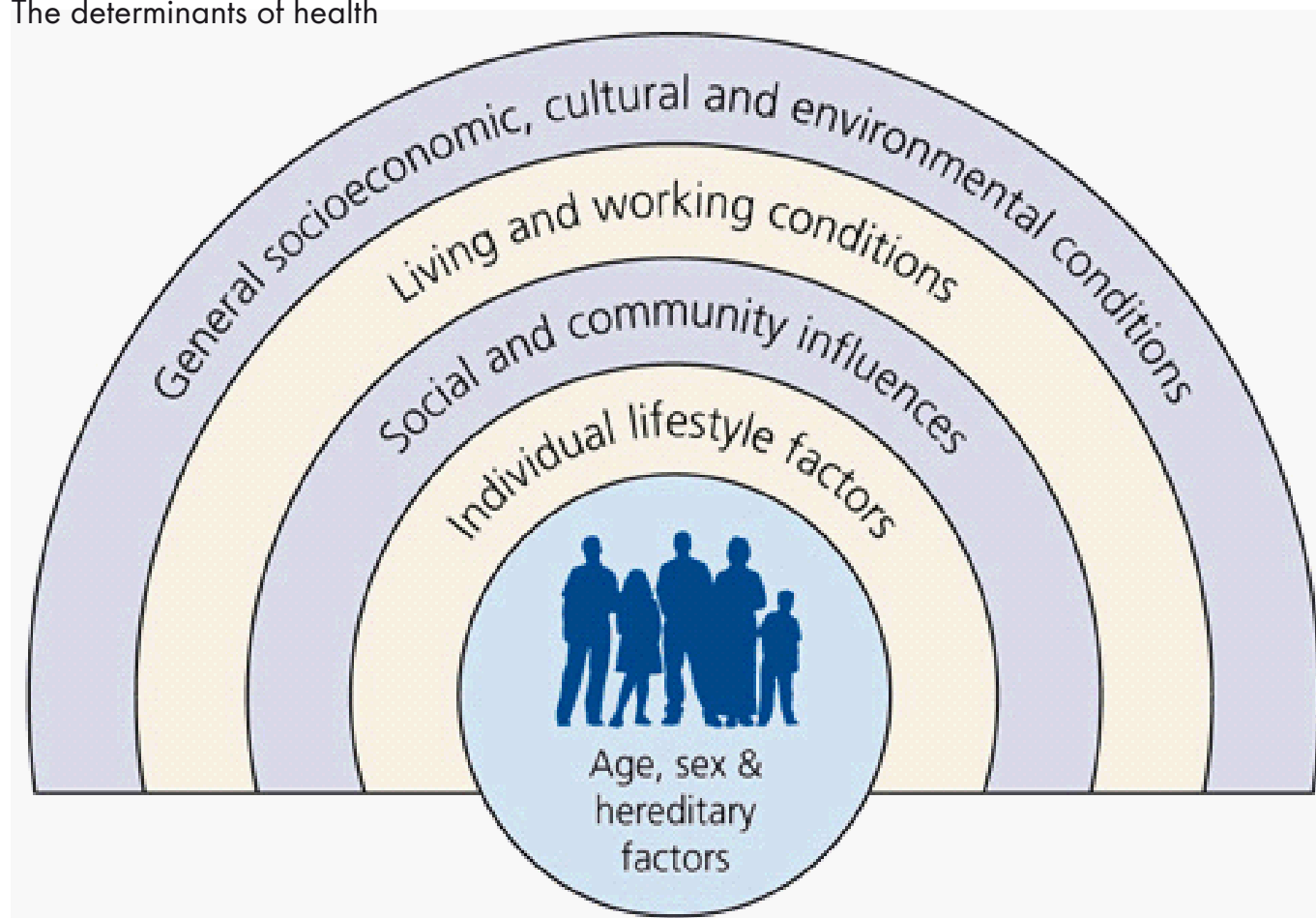
The Marmot review 'Fair Society, Healthy Lives' showed how tackling the social determinants of health (the conditions in which people are born, grow, live, work and age) can reduce health inequalities. The following six policy objectives described by Marmot were used to organise North Yorkshire's JSNA and underpin our overall approach to reducing the health inequalities that exist in the county:

- Give every child the best start in life.
- Enable all children, young people and adults to maximise their capabilities and have control over their lives.
- Create fair employment and good work for all.
- Ensure a healthy standard of living for all.
- Create and develop healthy and sustainable places and communities.
- Strengthen the role and impact of ill health prevention.

In order to ensure that all subjects were covered by the JSNA, an additional section called 'Maximise the

effectiveness of condition and treatment pathways' and a section on population groups who have specific health needs were included.

The determinants of health



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Developing our Joint Health and Wellbeing Strategy

The draft strategy has been developed starting with the Health and Wellbeing Board's vision, identification of the challenges which must be faced and the principles which should be adopted to meet the challenges. Five priorities have been chosen as immediate areas for improving health and wellbeing in North Yorkshire.

The strategy concentrates on how organisations both statutory and voluntary working together can have the most impact on the health and wellbeing of people in North Yorkshire. It does not seek to outline core services and objectives expected from individual organisations. The strategy gives guidance about North Yorkshire's strategic priorities to the organisations that commission and organise services. The strategy does not set out to dictate what services should actually be provided locally or across the whole county.

It is felt, particularly in these very difficult economic times, organisations should seek ways of working together to improve people's health and wellbeing, focussing on a few areas where it is felt a difference

could be made. The role of the Health and Wellbeing Board is to offer guidance, encouragement, coordination and, when needed, leadership to help facilitate the partnership working to make this difference. The Health and Wellbeing Board will also want to evaluate over time if we have made collectively a difference.

The Health and Wellbeing Board's vision

'People in all communities in North Yorkshire have equal opportunities to live long healthy lives'

The challenge for the Board is to empower people of all ages to live healthy, active lives. A key objective is that the health inequalities that exist across the county will be reduced.



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Our challenges

The increasing care needs of a rapidly growing population of older people

North Yorkshire's population is changing, with many more people living for longer. Over the next ten years and beyond, we will continue to see a substantial increase in the elderly population, and in the prevalence of age-related conditions including obesity, diabetes, stroke and dementia and other long-term conditions. There is a huge challenge to find new ways of adequately meeting the resulting care and support needs of much higher numbers of very elderly people in the County.

The health inequalities within North Yorkshire and within each district.

There is a gap in life expectancy between the least and most deprived communities across North Yorkshire of around 6.3 years for men and 4.6 years for women. Within some districts, the gap is nearly ten years.

Across the life course, there are challenges at every stage including child poverty, inequitable educational attainment, fuel poverty and social isolation.

North Yorkshire's 'killer' diseases

Circulatory disease (including heart disease and stroke)

and cancers account for the greatest proportion of deaths within North Yorkshire. Cancers are the most common cause of death in people under the age of 75 years.

The unsustainability of the current service model in North Yorkshire

People in North Yorkshire have high expectations of the quality and availability of health services. The rurality of the county presents difficulties; access to services, service availability and social isolation were recurrent themes identified by groups and individuals during the JSNA engagement process. The challenge in a period of financial constraint is to find creative, innovative and efficient solutions to address people's needs. The review of the system indicates the system must seek to deliver services within its



means and at the same time rebalance the investment by placing greater emphasis on prevention and support in communities and reduce the need for acute care.



The gap in life expectancy between the least and most deprived communities across North Yorkshire is around 6.3 years for men and 4.6 years for women. Within some districts, the gap is nearly ten years.

In North Yorkshire during 2009 there were 14,035 children living in poverty.



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Strategic principles

There are changes that can be made in the way health and wellbeing services are organised and how organisations work together.

Use the advantages obtainable from partnership working

Maximisation of the effectiveness, quantity, quality and efficiency of services is a key to the Health and Wellbeing Strategy. The aim will be to develop a coordinated network of health and social care commissioning and provision services, combining the input of statutory and independent sector organisations, making the best use of resources and enabling services to be responsive to the needs and views of users.

The Health and Wellbeing Board will give every encouragement to commissioners and providers to pursue an integrated approach as the key to providing integrated solutions for people and ensuring every opportunity is taken to reduce duplication of effort and investment. Our reviews clearly indicate that in not investing sufficiently in community-based services the system is having to invest too much in unaffordable acute provision. The approach will seek to get a better balance in the investment portfolio.

Identify, support and encourage community assets

Rather than public sector organisations identifying a need and then creating a public service to meet the need, sometimes referred to as 'the deficit approach', an alternative approach is to look at what support already exists in the community that could be utilised, encouraged and expanded to meet needs – known as 'the asset-based approach'.

The asset-based approach values the capacity, skills, knowledge, connections and potential in a community. In an asset approach, the glass is half full rather than half empty.

More emphasis should be placed on the role and responsibility people and communities have for their own health and wellbeing.

Develop community based prevention and reablement services – prevention is better than cure

There needs to be a shift in focus from sickness and cure to wellness; people should be enabled to stay healthier for longer. Support should be provided as close to people's homes as possible so that people are enabled to live independently and maintain their



Fourteen of the 18 areas in North Yorkshire which are in the most deprived fifth of England are in the Scarborough district.

In North Yorkshire 33,800 people with diabetes have been identified, but there is an estimated additional 14,000 people who do not know they have diabetes.

The estimated number of people in North Yorkshire with dementia is estimated to increase from 8,700 in 2010 to 13,500 by 2020.



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quality of life for as long as possible within their local community.

There is a major opportunity for redesign of services with greater integration and partnership working plus increased, better and creative use of existing community assets.

Maximise health gain from other strategies which affect the wider determinants of health

In order to reduce health inequalities, action needs to be taken across the spectrum of social determinants of health. The evidence suggests that focusing on the six 'Marmot' domains will reduce inequalities. However, some domains have less of a health focus and more of a focus on the wider determinants of health.

The Health and Wellbeing Board will work with partners where health is not the primary focus to highlight and maximise the health gain from their strategies which affect the wider determinants of health, e.g. affordable housing, lifelong learning, economic development.

Developing cost-effective solutions informed by the evidence base.

In order to maximise the impact of positive health and

wellbeing it is important to use available sources of robust evidence.

Solutions need to focus on those which have the greatest impact for most people, at the appropriate cost, taking account of available resources and pressures on finance.

**In North Yorkshire
52,790 people
have common mental
health problems.**



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The priorities

Ensure every child has the best start in life

Giving every child the best start in life is crucial to reducing health inequalities in the whole of people's

lives. To have an impact on health inequalities we need to address children's access to positive early experiences. Interventions in later life, although important, are considerably less effective when good early foundations are lacking. It is therefore vitally important that we help to support the early development of healthy behaviours and foster a

supportive community for parents and families to give children the best opportunities in life.

Areas of focus

- Breaking the cycle which results in a poor start in life for children due to family circumstances. Linked problems, such as unemployment, discrimination, poor skills, low incomes, poor housing, high crime and family breakdown are all important factors in the wider determinants of health.
- Give priority to pre and post-natal interventions that reduce adverse outcomes of pregnancy and infancy.
- Make a concerted multi-agency approach to identify children and families who are vulnerable to poverty, with high and complex needs or in challenging situations. All partners will develop and contribute in partnerships to integrated approaches to solutions.
- There will also be a focus on creating positive opportunities for young people to contribute to the community and raise their self-esteem.



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Strengthen the role and impact of ill health prevention and encourage healthy lifestyles and behaviours

Advantages will be gained both economically and for people's actual health by putting greater emphasis on good health compared with treating ill health.

Long-term smoking causes a range of cancers and circulatory disease and reduces life expectancy by an average of ten years. Sedentary behaviour, poor diet and obesity are closely linked to the development of diabetes, heart disease, joint and back problems and depression.

We know from our JSNA we have challenges to address in North Yorkshire.

While most of us know what we can do to improve our own health and wellbeing not everyone makes healthy decisions or adopts healthy lifestyles. More affluent people tend to adopt healthy behaviours. So having the opportunity to earn income plays a part as does one's housing circumstances and access to transport and leisure services. Encouraging healthy lifestyles and behaviours in children can have an impact as it is likely that these habits and activities will last a lifetime.

We want to work in partnership to ensure that the way we provide treatment or care increases people's control over their health and any long-term conditions, thus minimising the impact of ill health on their lives.

Areas of focus

- Encourage positive lifestyle behaviour changes, including:
 - reducing the number of people who are smoking and the number of people drinking at levels harmful to their health;
 - improve physical activity particularly in groups where uptake is low and increase opportunities for people to make more healthy food choices; and
 - promote good sexual health.
- Improve early detection of cancers.
- Improve how long-term conditions are managed so that dependency on secondary care is reduced.
- Maximise opportunities for affordable and accessible housing.
- Ensure that people with long-term conditions receive appropriate healthy lifestyle support services.

Advantages will be gained both economically and for people's actual health by putting greater emphases on good health compared with treating ill health.

Improve emotional health and wellbeing

Emotional and mental wellbeing is important across all age groups. Mental health is not just the absence of mental disorder. It is defined as a state of wellbeing in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.

We also know that physical health and mental health are strongly linked. The challenge of dealing with pain or a long-term condition can impact on one's mental health and sense of wellbeing. We also know that two

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thirds of people with persistent mental health problems also have a long-term physical complaint. Travellers, people who are homeless, those coping with debt, those with learning disabilities and those who are lonely and isolated are at increased risk of mental ill health. Some minority communities face increased challenges in accessing mental health services.

So the challenge in North Yorkshire is to give attention to those at greater risk while also improving the health and wellbeing needs of the whole community.

Actions to develop sustainable, cohesive and connected communities have an important role in promoting good mental health as there is evidence that strong social networks help protect people against physical and mental health stress. So, having safe places for children to engage in positive activities; reducing crime and anti-social behaviour and supporting people to reduce their dependencies on substance misuse and tackling domestic violence all have their part to play in developing safer supporting communities.

Areas of focus

- Promotions on positive mental health.
- Place greater emphasis on addressing the 80% of all mental health problems that do not reach secondary care services.

- Minimising the negative impacts of alcohol and illegal drugs and associated anti-social behaviour on health and wellbeing
- Take an early intervention low-level prevention approach in mental health particularly for people in deprived areas
- Seek to reduce domestic violence
- Maximise opportunities for affordable housing
- Support and implement 'Supporting unpaid carers in North Yorkshire' 2012-2015



Enable older people to be safe, independent and well

As well as the need to find ways to support the increasing numbers of older people to lead independent lives, we also need to appreciate and increasingly value older people as a community asset rather than just view this group as a 'drain on resources'.

In our JSNA events across the county of North Yorkshire participants aware of the increasing numbers of older people in our county spoke of the challenges faced by living longer and possibly experiencing longer periods of poor health in the latter years of their life.

However, there was also much discussion about older people being an asset to their local community and of their contribution, for example to the voluntary sector.

There was also concern about the numbers of people feeling lonely and isolated leading to depression and dependencies on prescriptions and even alcohol.

Another concern was the numbers of older people spending too long in hospital and of the need to bring greater dignity and respect into service delivery.

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Total spend nationally across health and social care on common users is over £70bn and nearly £40bn on older people.

Long-term conditions (LTCs) represent nearly 70% of health and social care spend, nearly 80% of inpatient

bed days, 55% of GP appointments and nearly 70% of outpatient and A&E attendances

The proportion of people with long-term conditions increases with age (70% of people over 85 have LTCs) The point at issue is not whether one is old

but whether one has a long-term condition requiring additional support. Referring back to our area of focus on tackling ill health conditions and giving people appropriate support for their long-term condition, we know that tackling this area in a more co-ordinated way will also greatly enhance the life of older people while recognising that LTC issues can be experienced by all age groups, not just older people.

Likewise taking a whole system approach to early intervention and prevention will enable people to stay independent and healthy longer. Good diet and falls prevention will help avoid bone damage and osteoporosis. Placing greater emphasis on care in the community will reduce hospital admissions and timely support for people with dementia will enable them and their families to cope longer and to live with dignity.

Reference has already been made to the benefits of strong, close communities. Older people already make a valuable contribution to the community of North Yorkshire, particularly through their voluntary work. It will be important that we support, expand and grow this asset as a means of supporting vulnerable people in our community and ensuring that older people with energy, talent and time to give feel that they are playing a valuable role which in turn reduces isolation and improves health and wellbeing.



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Areas of focus

- Reduce social isolation.
- Ensure services are rapidly developed to meet the increasing needs of this group, placing an emphasis on integrated interventions which reduce unnecessary hospital admissions for people with long-term conditions and give improved outcomes.
- Ensuring timely diagnoses and inter-agency responses supporting older people with dementia.
- Ensure that there are prevention interventions addressing falls, stroke, cardiac difficulties and flu.
- Create opportunities to support, expand and grow the contribution of older people in developing safer, supportive communities.

Create and develop healthy sustainable places and communities in which people can flourish

In North Yorkshire's JSNA road-shows there was much praise for the beautiful countryside in which we live. There were discussions on how best to keep people healthy and well by encouraging more leisure activities in our countryside. However, people also recognised that access to employment was more challenging in parts of our rural communities. While

some areas called for better access to transport others recognised that better transport planning can promote other forms of more active healthy transport such as walking and cycling, reduces traffic accidents and facilitates social interaction and contributes to reducing isolation. Affordable housing, access to open space, minimised air and noise pollution, good community facilities, employment within easy travelling distances, safe places to play and participate in community activities all contribute to the development of healthy communities.

Areas of focus

- Maximising opportunities for local economic and job development.
- Identify people and homes at risk of fuel poverty and improve access to energy-efficient advice.
- Improve broadband access as a means of stimulating the local rural economy and increasing access to services.
- Improve availability of affordable housing.
- Build on strengths of local communities, including the voluntary sector and promote inclusion.
- Continue the development of a more sustainable transport system that is vital to continue to meet the social and economic needs of local communities and safeguard the environment.

Affordable housing, access to open space, minimised air and noise pollution, good community facilities, employment within easy travelling distances, safe places to play and participate in community activities all contribute to the development of healthy communities.

How will we know if we are making a difference?

- We will ask partners on the Health and Wellbeing Board to demonstrate how they are using the principles outlined in this strategy and how they are contributing to improving the areas of focus.
- We will develop outcome measures to demonstrate whether the strategy is making a difference.

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These priorities have been chosen because individually and collectively they:

- are relevant to a range of age groups;
- affect large numbers of people;
- relate to major causes of illness and death;
- require substantial partnership working to address and make a difference;
- are of high importance to the local public;
- have significant potential to improve our health and wellbeing outcomes; and
- require strong leadership, political consensus and coordinated action across organisations and wider society to achieve change.

How will these priorities be actioned and addressed over the period of the strategy?

- The first step is to agree that these are the top priorities. All areas of the JSNA will need to be taken account of over time but some areas need particular attention.
- Part of the process will be to align local and countywide priorities.
- The Health and Wellbeing Board will formally ratify the final version of the priorities in

November 2012, after communities have given their feedback on the draft version.

- Commissioners in the County Council (children and adults services) and each NHS commissioning group will be asked to demonstrate that they have taken these into account in their commissioning plans.
- Targets and plans will be shared.
- Each year there will be an evaluation of progress and a review/refresh of the approach.

Areas for monitoring

There are some other areas, not included in the priority outcomes, which the Health and Wellbeing Board will monitor to help achieve positive outcomes for North Yorkshire's people and communities:

- Safeguarding children and adults.
- Population groups and communities who have particular difficulty accessing services.
- Incomes, benefits and the local economy.



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How to give feedback to this draft Health and Wellbeing Strategy:

You can tell us what you think about the draft strategy by completing a questionnaire downloadable from www.nypartnerships.org.uk/jhws

You can also email your views to jsna@northyorks.gov.uk or write to

**JSNA,
North Yorkshire House,
Scalby Road,
Scarborough YO12 6EE**

If you would like to know more about the strategy or to express a wish to get involved in making North Yorkshire an even healthier community you can contact nick.kemp@northyorks.gov.uk



What do you think?

Please share your views, comments and suggestions on the draft Joint Health and Wellbeing Strategy

Our challenges

We have outlined what we think are the key challenges facing the health and wellbeing of people in North Yorkshire:

- Increasing care needs of a rapidly growing population of older people.
- The health inequalities within North Yorkshire and within each district.
- North Yorkshire's "killer" diseases.
- The unsustainability of the current service model in North Yorkshire.

Do you agree that these challenges are the most important issues to be addressed by this strategy?

Strongly agree Agree Don't know Disagree Strongly disagree

Why do you think this?

Strategic principles

We have outlined what we think are the changes that need to be made to the way health and wellbeing services are organised and how organisations work together:

- Use the advantages obtainable from partnership working.
- Identify, support and encourage community assets.
- Develop community based prevention and reablement services - prevention is better than cure.
- Maximise health gain from other strategies which affect the wider determinants of health.
- Develop cost-effective solutions informed by the evidence base.

Do you agree that working using these principles will be a good way for us to go about improving health and wellbeing?

Strongly agree Agree Don't know Disagree Strongly disagree

Why do you think this?

Priorities

We have outlined five priorities and areas for focus within them that we believe should be treated as priorities.

- **Ensure every child has the best start in life**

Do you agree that this should be a priority outcome?

Strongly agree Agree Don't know Disagree Strongly disagree

Why do you think this?

- Breaking the cycle resulting from a poor start in life for children due to family circumstances.
- Give priority to pre and post natal interventions.
- Create positive opportunities for young people.
- Work in partnership to identify children and families who are vulnerable to poverty, have high and complex needs or are in challenging situations, and develop integrated solutions.

Do you agree that these should be the areas for focus?

Strongly agree Agree Don't know Disagree Strongly disagree

Why do you think this?

- **Strengthened the role and impact of ill health prevention and encourage healthy lifestyles and behaviours**

Do you agree that this should be a priority outcome?

Strongly agree Agree Don't know Disagree Strongly disagree

Why do you think this?

- Encourage positive lifestyle behaviour changes.
- Improve early detection of cancers.
- Improve how long term conditions are managed so that dependency on secondary care is reduced.
- Maximise opportunities for affordable and accessible housing.
- Ensure that people with long term conditions receive appropriate healthy lifestyle support services.

Do you agree that these should be the areas for focus?

Strongly agree Agree Don't know Disagree Strongly disagree

Why do you think this?

• **Improve emotional health and wellbeing**

Do you agree that this should be a priority outcome?

Strongly agree Agree Don't know Disagree Strongly disagree

Why do you think this?

- Promotions on positive mental health.
- Place greater emphasis on addressing the 80% of all mental health problems that do not reach secondary care services.
- Minimising the negative impacts of alcohol and illegal drugs and associated anti-social behaviour on health and wellbeing.
- Take an early intervention low level prevention approach in mental health particularly for people in deprived areas.
- Seek to reduce domestic violence.
- Maximise opportunities for affordable housing.
- Support and implement 'Supporting unpaid carers in North Yorkshire' 2012-2015.

Do you agree that these should be the areas for focus?

Strongly agree Agree Don't know Disagree Strongly disagree

Why do you think this?

• **Enable older people to be safe, independent and well**

Do you agree that this should be a priority outcome?

Strongly agree Agree Don't know Disagree Strongly disagree

Why do you think this?

- Reduce social isolation.
- Ensure services are rapidly developed to meet the increasing needs of this group placing an emphasis on integrated interventions which reduce unnecessary hospital admissions for people with long term conditions and give improved outcomes.
- Ensuring timely diagnoses and inter agency responses supporting older people with dementia.
- Ensure that there are prevention interventions addressing falls, stroke, cardiac difficulties and flu.
- Create opportunities to support, expand and grow the contribution of older people in developing safer, supportive communities.

Do you agree that these should be the areas for focus?

Strongly agree Agree Don't know Disagree Strongly disagree

Why do you think this?

- **Create and develop healthy sustainable places and communities in which people can flourish**

Do you agree that this should be a priority outcome?

Strongly agree Agree Don't know Disagree Strongly disagree

Why do you think this?

- Maximising opportunities for local economic and job development.
- Identify people and homes at risk of fuel poverty and improve access to energy efficient advice.
- Improve broadband access as a means of stimulating the local rural economy and increasing access to services.
- Improve availability of affordable housing.
- Build on strengths of local communities, including the voluntary sector and promote inclusion.
- Continue the development of a more sustainable transport system that is vital to continue to meet the social and economic needs of local communities and safeguard the environment.

Do you agree that these should be the areas for focus?

Strongly agree Agree Don't know Disagree Strongly disagree

Why do you think this?

How will we know when we are succeeding?

Can you suggest some outcome measure that may help us to track our progress?

What do you think might stop the strategy succeeding? What could be done to ensure it succeeds?

Please email completed questionnaires to jsna@northyorks.gov.uk or post to:
JSNA, North Yorkshire House, Scalby Road, Scarborough YO12 6EE

Electronic versions of this form can be downloaded from www.nypartnerships.org.uk/jhws