



# **Health in Coastal Communities**

## **Scarborough and Whitby Area Constituency Committee**

**29th November 2024**

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Context – What the data tells us

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# Scarborough and Whitby – Local Context

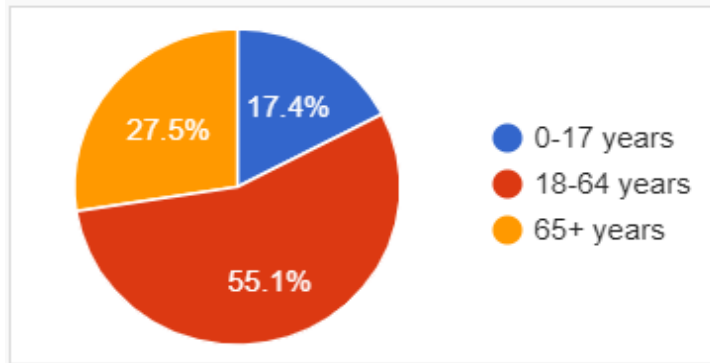
The population of Scarborough district is approximately 109,000 (based on 2021 census data).

The Whitby area has a population of around 24,400 people. It has an older age profile than that of England.



48.6%  
are  
female

51.4%  
are male



## Sex

Whitby & District (England)

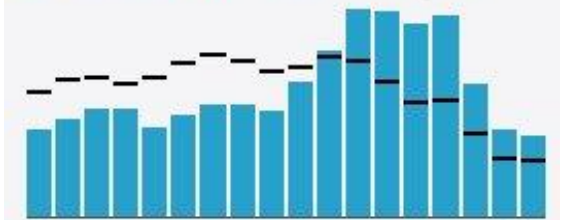
Female 51.2% (51.0%)

Male 48.8% (49.0%)

% of all people

## Age profile

Whitby & District (England)



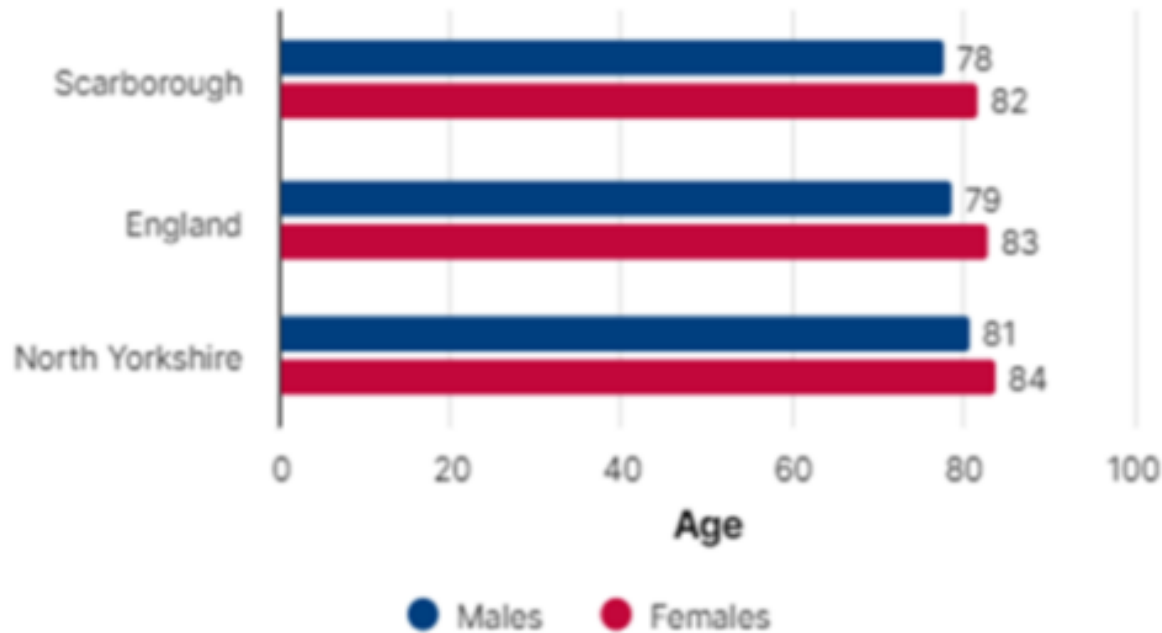
0 years 85+

% of all people, 5 year age bands



# Life Expectancy

## Life Expectancy at Birth (2020-22)



## Healthy Life Expectancy at Birth (2018 - 20) in North Yorkshire



66

years for  
females



67

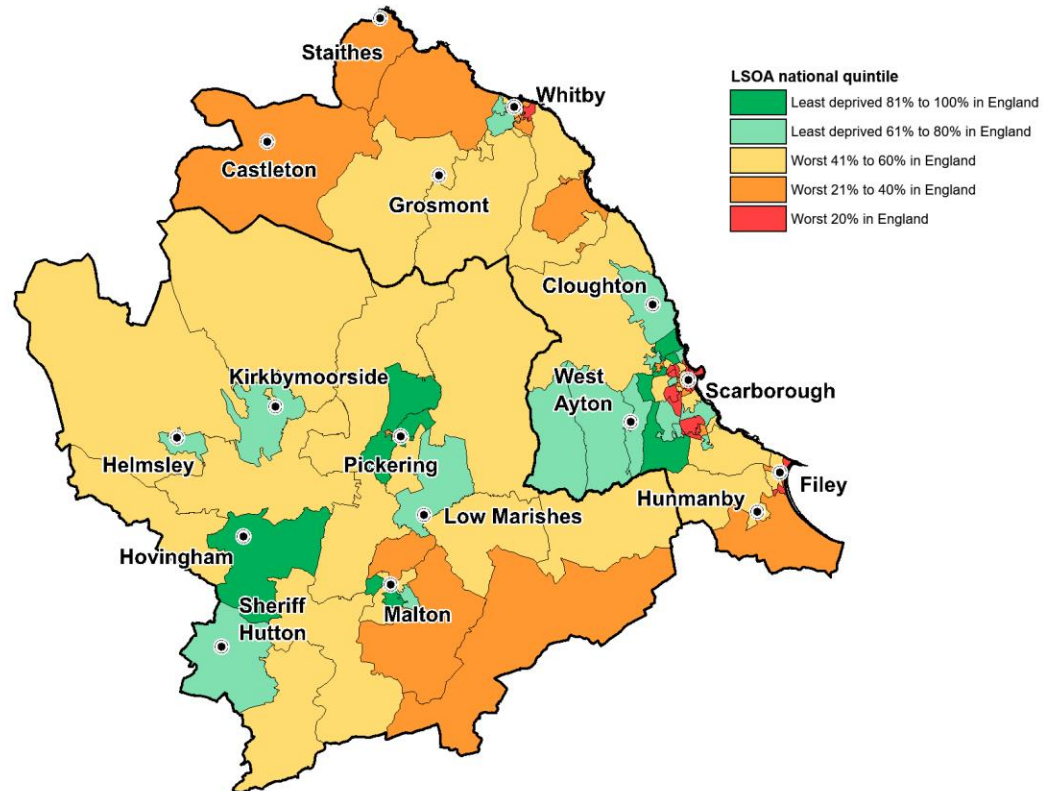
years for  
males

ONS data as found on  
[Fingertips | Department of Health and Social Care](#)



# Deprivation

Index of Multiple Deprivation - Indices of Deprivation 2019  
Scarborough and Ryedale LSOAs by National Quintile



Notes  
1. Source: Indices of Deprivation 2019, MHCLG  
2. Ordnance Survey Map Data: © Crown Copyright and Database Rights [2023] Ordnance Survey 100017946  
3. Compilation & Analysis: Strategy & Performance (HAS), NYC

In Scarborough 24.1% (26,000 people) live in the 20% most deprived areas in England.

In Whitby & District 15.1% (3,681 people) live in the 20% most deprived areas in England.

Across North Yorkshire the proportion is 5.8%.



Indices of Deprivation 2019  
data

# Employment & Housing

## Scarborough



**53%**

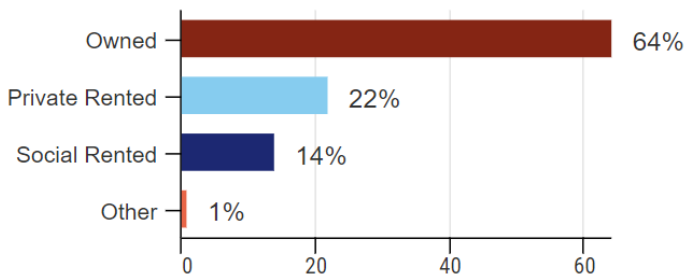


of residents are economically active

Of those who are inactive:

- **5.2%** are long term sick or disabled
- **32%** are retired

Tenure of Households in Scarborough

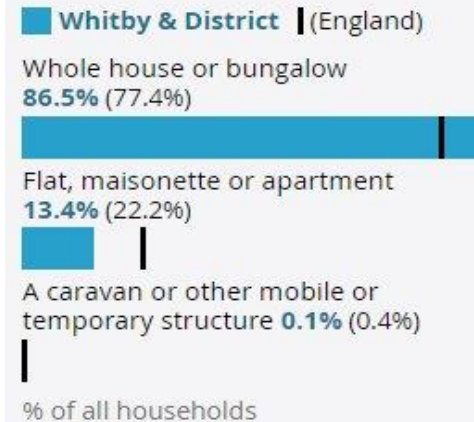


**78%** of people live in a whole house or bungalow

### Economic activity status



### Accommodation type



## Whitby

**50.2%** of residents are economically active.

Of those who are inactive:

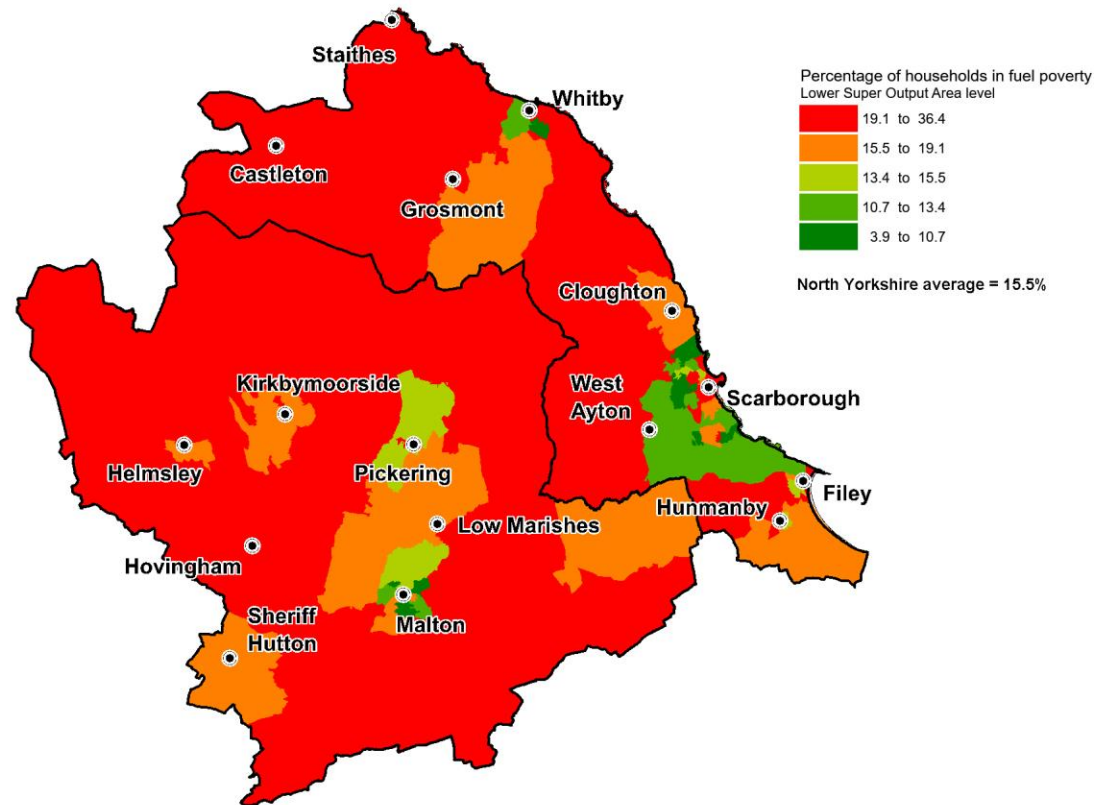
- **4.7%** are long term sick or disabled
- **33.2%** are retired

- **86.5%** of people live in a whole house or bungalow



# Fuel Poverty

Sub-regional fuel poverty estimates 2021



Notes

1. Source: Sub-regional Fuel Poverty Estimates 2021, Department for Energy Security and Net Zero
2. Low Income Low Energy Efficiency (LILEE) fuel poverty definition
3. Ordnance Survey Map Data: © Crown Copyright and Database Rights [2023] Ordnance Survey 100017946
4. Compilation & Analysis: Strategy and Performance Team, NYC, 2023

## Scarborough

- **19.0%** of households are in fuel poverty
- **1.8%** of households have no central heating
- **71.7%** of households have mains gas central heating

## Whitby & District

- **19.5%** of households are in fuel poverty (13.1% in England) in 2022
- **2.1%** of households have no central heating (1.5% in England)
- **59.7%** of households have mains gas central heating (73.4% in England)

[Fuel poverty statistics - GOV.UK.](#)

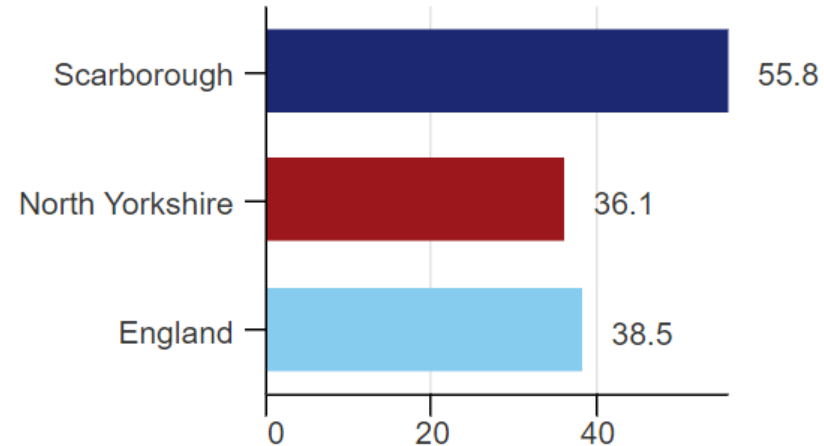


# Wider Determinants



Smoking prevalence in adults (18+) in Scarborough – current smokers (2022 OHID data)

Alcohol related mortality per 100,000 people (2021) (2021 OHID data)



65% of people in Scarborough are physically active & 25% are physically inactive (2021-22) (2021-22 OHID data)





# Coastal Health Needs Assessment

# Coastal Health - rationale

We know that... **“Coastal communities, the villages, towns and cities of England’s coast, include many of the most beautiful, vibrant and historically important places in the country. They also have some of the worst health outcomes in England, with low life expectancy and high rates of many major diseases”**. Chief Medical Officer’s Annual Report 2021 - Health in Coastal Communities ([publishing.service.gov.uk](https://publishing.service.gov.uk))

National drivers of poor health in coastal communities can include:

- In-migration of older, retired citizens with complex health needs
- Outmigration of younger populations in search of further education and employment opportunities
- Deprivation is often highly concentrated on the coast
- Reliance on a single industry that has moved/radically changed, leading to employment that is often scarce, low paid, or seasonal

# Coastal Health - Health Needs Assessment

- The Public Health team are looking closely at available data, to better understand the specific health burden our coastal communities face, which can be hidden in the data with relatively affluent inland neighbours.
- The Healthy Lives, Community and Economy team are doing this by undertaking a Health Needs Assessment (HNA) to examine the data we have available at a local level.
- The aim is to highlight local variations that contribute to worse health outcomes - building on what we already know at a District level.
- We are currently analysing Middle Super Output Area (MSOA) level data – comparing the three coastal towns to the rest of North Yorkshire.
- Nearly all indicators are demonstrating that these three towns have a higher burden of disease across a range of physical and mental health conditions.

# Coastal Health – Health Needs Assessment

- Insight gathered from over 30 individuals, community groups and health providers will be included in the HNA, to provide a rich picture of what it's like to live and work in North Yorkshire's coastal localities – including the positives!
- We are also gathering data on the wider determinants of health (such as transport, education, employment, and housing).
- A first draft of the HNA will be ready for comments and feedback early in 2025.



# Children and Young People East Coast

November 2024

← Advantage: Strong Local Care Partnership with a Children and Young People's subgroup with identified priorities and workplan →

### **Mental health**

- My Happy Mind
- 2<sup>nd</sup> Mental health support team in schools
- Sidewalk older CYP wellbeing support
- Pilot of talking therapies with virtual reality (GP led)

### **Challenges identified:**

#### **Speech and language**

- Challenges with service

### **Vaccinations**

- Local work on vaccinations has increased Scarborough school children's flu vaccination uptake compared to previous years

### **School attendance**

- Scarborough secondary schools lowest attendance in NY
- Project planned to map mental health support and levels of absence

### **Teen pregnancy**

- High levels of teenage pregnancy
- Specific work to enhance community support for young parents

### **Community safety**

- Health and wellbeing strategy consultation identified particular safety concerns in young women highlighted to local community safety



**Healthy Schools**  
North Yorkshire



**Healthy Early Years**  
North Yorkshire



The next Healthy Schools event at East Barnby Outdoor Learning Centre is on Monday 26<sup>th</sup> November

### **Asthma Friendly Schools**

- Sidewalk taken on this programme
- 2 schools expressing interest
- Still very new!

### **Babi Scarborough**

- New research initiative, based on Born and Bred in Bradford
- Bringing together multiple sources of routine data to answer health-based questions

### **Oral health**

- Supervised toothbrushing in 9 EY settings + 1 special school
- PAT initiative in 4 primary schools
- Flexible commissioning in 2 practices
- Child-only contract where NHS contracts handed back

# Scarborough Teenage Pregnancy Taskforce

The Scarborough Teenage Pregnancy Partnership group aims to:

- Reduce teenage pregnancy rates in Scarborough and in particular to reduce the gap between Scarborough, national rates and the rest of North Yorkshire.
- Ensure that pregnant teenagers and teenage parents are empowered and supported to achieve good health and wellbeing, reduce their risk of long-term social exclusion and provide the best start in life for their child.

NYC Public Health (Chair)	YorSexual Health Service	0-19 Service (HDFT)	GP Practices/SCORE PCN
Social Prescribers	Community Pharmacy North Yorkshire	Early Help/Youth Justice (NYC)	Education and Skills (NYC)
Leaving Care (NYC)	Children and Families Social Work (FAST, NYC)	Placement and Fostering (NYC)	Sidewalk Youth Group
Young People Pathway (Foundation UK)	North Yorkshire Youth	Communities (NYC)	Maternity (YSTHFT)

Uni of York







# Protecting Health

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# Autumn vaccinations

- Flu and COVID-19 vaccines available for free for eligible cohorts through community pharmacies and participating GP practices  
<https://www.nhs.uk/live-well/seasonal-health/keep-warm-keep-well/>
- For people who are not eligible for free vaccines on the NHS, flu and COVID-19 vaccines can be accessed via participating local pharmacies for c.£20 and c. £100 respectively.

# North Yorkshire Council staff vaccination programme

- Flu and COVID-19 vaccination clinics were arranged starting from the w/c 7th October and until 23<sup>rd</sup> October.
- Staff had the option to get either vaccine or both at the same appointment.
- Frontline social care staff were eligible i.e. NYC staff who were directly involved in the care of patients or clients, including employees who provide community-based care services to people in their own homes, or who care for people in residential care homes or other facilities, or others involved directly in delivering care such that they and vulnerable patients/clients are at increased risk of exposure to flu.
- As in previous years, eligible staff could also pay for a flu vaccine at a pharmacy and get the cost reimbursed through MyView.

# Scarborough focused work

- North Yorkshire vaccine uptake rates are generally better than England but there are pockets where rates are low (e.g. some areas within the Scarborough locality).
- Established multi-agency group led by NY Public Health in collaboration with partners including NHS England, the School Age Immunisations Service, ICB colleagues, Primary Care Networks, GPs, Early Help colleagues, Localities team, libraries and others.
- Work to date includes:
  - Work with our behavioural science team within Public Health to improve invitation letters to vaccination appointments
  - Research into reasons for vaccine hesitancy amongst migrant populations
  - Support to projects aiming to increase uptake of cancer screening programmes
  - Promotion of local and bespoke screening clinics (e.g. cervical screening through YorSexualHealth)
  - Organisation of ad hoc immunisation clinics
  - Support to vaccinate refugee and asylum seeking families and unaccompanied asylum seeking children
  - Multiagency attendance at community events
  - Support with translating resources

# Migrant Health

- Working with CYPS colleagues who support Unaccompanied Asylum Seeking Children in Scarborough to ensure offer of vaccinations and screening as appropriate (e.g. TB screening).
- Working closely with POMOC who highlight issues pertaining to Eastern European communities in Scarborough to find solutions (e.g. providing translated materials on cancer screening).

# Achievements

- **Secured funding:** ICB Health Inequalities Funding for a Public Health Practitioner, who has been in post since May 2024.
- **Academic partner:** We have developed a partnership with University of York, who conducted research into the [experiences of young parents in Scarborough](#). This ensures our work has a strong evidence base.
- **Young parents' advisory group established:** 8 young parents from Scarborough share their experiences to shape this work. Developed relationship with NYC Libraries service to run these groups.
- **Systems working:** Continued to develop and establish links with between system partners. For example between YorSexual Health and teams within North Yorkshire Council's Children and Young People Directorate including Leaving Care, Early Help, Trusted Relationships, Permanence and Reunification. YorSexual Health will deliver training on sexual health awareness, consent and developing staff confidence in discussing sexual health at a locality event. This will cover all CYP teams who work in Scarborough.
- **Young parent's champions scheme:** Recruited professionals within NYC CYP Directorate to attempt to challenge stigma of being a young parent. This will build on Uni of York's research, and there has been lots of interest from a range of organisations.



A stack of seven smooth, light-colored stones is balanced on a beach. The stones are stacked vertically, with the largest at the bottom and the smallest at the top. The background shows a blurred ocean and sky. The text "Examples of addressing health inequalities on the coast" is overlaid on the left side of the image.

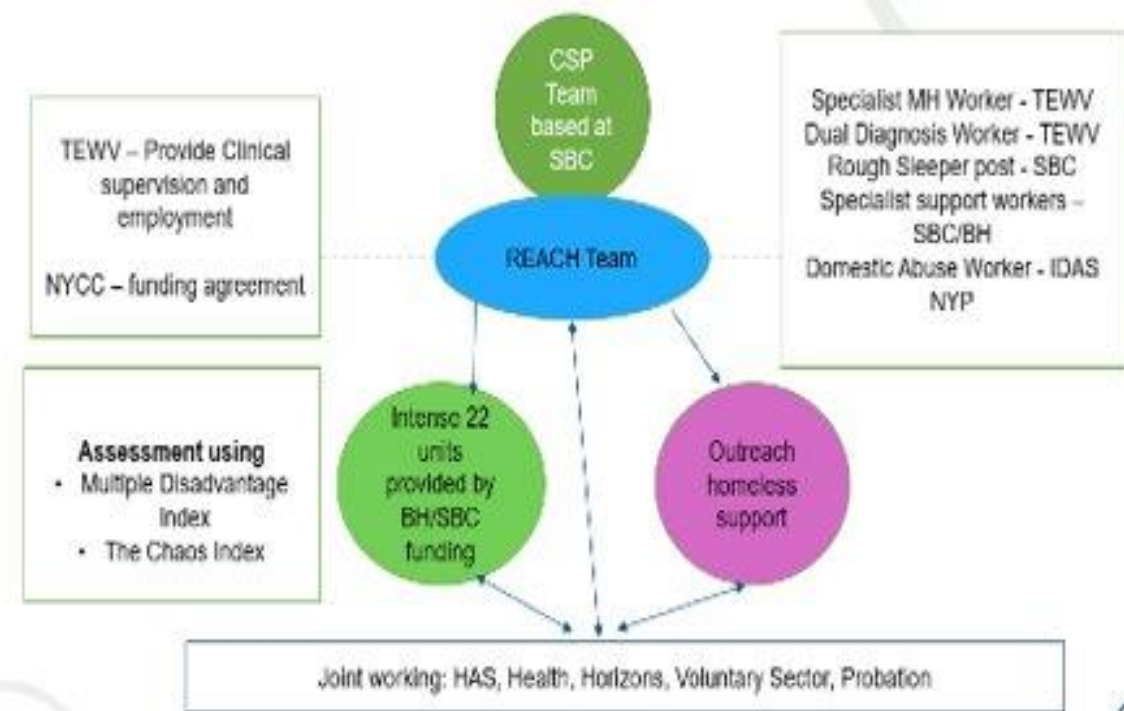
# Examples of addressing health inequalities on the coast

# REACH Project

- Reducing
- Exclusion for
- Adults with
- Complex
- Housing needs

A 3-year service to provide dedicated units and intensive and community support to people who are currently homeless or likely to be made homeless due to a range of social and long term health needs including

- mental health/substance misuse,
- physical health needs or
- because of their criminal activity or anti-social behaviour.



## Successes

- Hep C screening and advice
- Harm reduction (embedded practice)
- Sexual health
- Think On coaching
- System Influence
- Trauma informed care



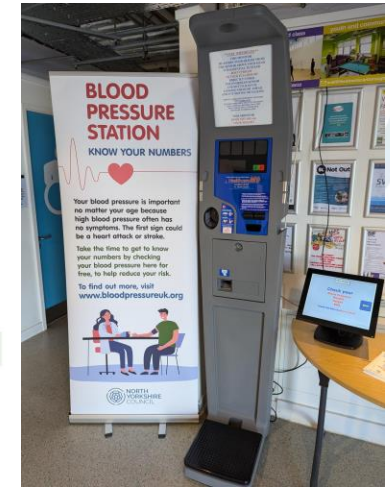
# REACH Project

## Published pathway of engagement



# Know Your Numbers

- Funded through ICB Health Inequalities funding and the aim is to improve awareness of blood pressure and increase the number of people having their blood pressure checked.
- 2 x public events at Scarborough Sports Village before Scarborough Athletic FC match during **KYN Week 2023 & 2024**
- First community-based self-service 'pressure station' launched in Whitby library in **March 2024**
  - 30 libraries and supermobile library had pressure stations during KYN Week 2024. 26 libraries to continue with this offer.
- Health kiosk installed at The Street in Scarborough in **June 2024**
- 6 x NYC staff events delivered by Occupational Health, 4 on the coast:
  - Castle House (Scarborough), Eastfield Highways Depot, Scarborough Town Hall and Whitby Highways Depot
- Over **600** people have had their BP checked so far
  - **242** of which had theirs actively checked
  - At least **166** people have been advised to go to their local community pharmacy for follow up



# CVD checks in workplaces

- Successful in gaining funding from the DHSC to deliver a short-term pilot (up to March 2025)
- Aim is to assess viability of health checks in the workplace
- Target groups are those who are less likely to access health checks through traditional routes, such as routine and manual workers
- 2 providers:
  - NYC Occupational Health – focus on NYC staff countywide
  - NHS provider – focus on external workplaces in Scarborough and Ryedale
- Delivery commenced early October 2024 for Occupational Health, early November 2024 for NHS provider
- Maximum of 1,440 checks to be delivered



Funded by  
UK Government

## FREE Heart Health Checks available for staff

Free Heart Health Checks are coming here to help you find out about your heart health and risk of heart attack or stroke.

These life-saving checks with a health professional last 20 minutes and include:

- ✓ a discussion about your health, family history of coronary heart disease, how much you drink and smoke
- ✓ blood pressure check
- ✓ cholesterol and blood sugar finger-prick test
- ✓ height and weight measurement
- ✓ an assessment to check your risk of developing a heart attack or stroke in the next 10 years
- ✓ personalised advice to make healthy lifestyle choices
- ✓ signposting support to other services

These results will not be shared with any third party without your consent.

Speak to your line manager about how to access your check.

They will be able to provide further details on upcoming clinics and book you in for your Heart Health Check.

Date and time of upcoming clinic:



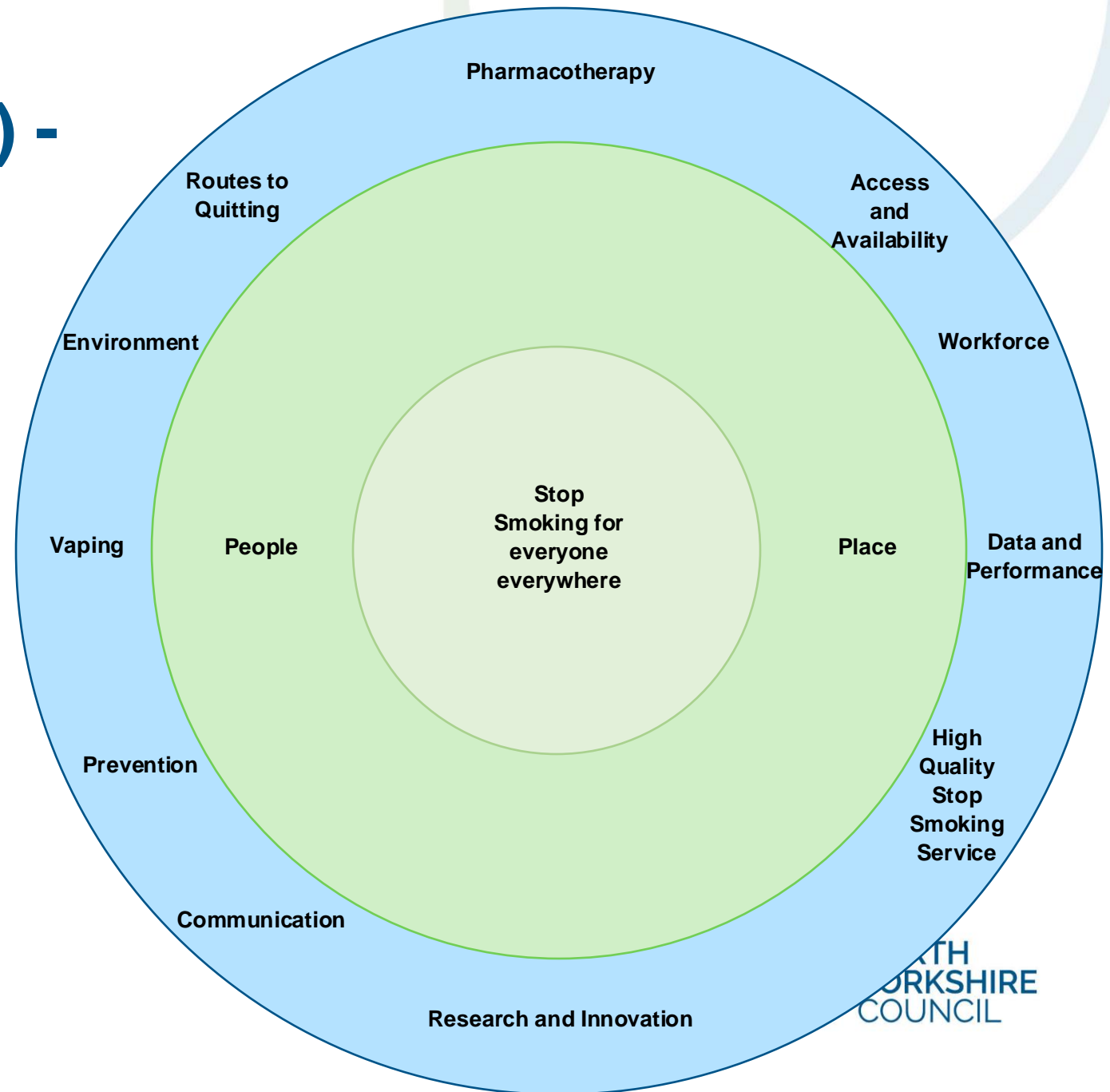
This programme is part of a national pilot programme funded by the Department of Health and Social Care to help deliver cardiovascular disease (CVD) checks in workplaces across North Yorkshire by the end of March 2025.

# Tobacco Control Strategic Framework (2025 onwards) - DRAFT

## Aim: to provide a high-quality stop smoking service

Focused on priority groups and place-based action

1. Intelligence led (use of population data sources including performance data)
2. Informed by insights and evidence base
3. Delivered by a talented, resilient competent workforce
4. Providing an easily accessible and user-friendly customer facing front door
5. Providing access to a range of tailored advice, support and treatment options for all ages
6. Speedy access to a range of pharmacotherapy including e-cigarettes to support quit attempts
7. Implementing innovative practice using lived and living experience the
8. Evaluative and reflective
9. Communication of messages that drive behavioural change
10. Harnessing community assets to drive referrals and sustain quit success
11. Collaborative working across clinical pathways



## The current offer

- 12 week stop smoking programme including behavioural support and access to evidence-based stop smoking medications
- People are 3 times more likely to quit and stay quit if they access this combination
- Provided by specialist, trained stop smoking advisors
- Available to ages 12 and upwards
- Free if exempt from prescription charges otherwise prescription charges apply
- E-cigarette friendly service
- Service is available however many times it takes to quit, no cap.
- Face to face/remote/hybrid consultations available
- 5 lead advisors working with priority populations

# Priority populations

Mental Health

Substance  
Misuse

Pregnancy

Long Term  
Conditions

Social Housing

Low Income/Debt  
Advice

Homelessness

Routine &  
Manual

Criminal Justice  
System

LGBTQ+

Young People &  
Prevention

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# Funding

Living Well Smokefree have benefitted from national funding aimed at creating a smokefree generation. The Government has provided a framework that Local Authorities must apply to meet the objectives of this funding.

This framework is based on Public Health evidence of local stop smoking interventions and has a focus on strengthening resources, capacity and enhancing infrastructure. The funding could be used for:

1. Leadership, coordination and commissioning
2. Increasing local resources to help people quit
3. Building demand for local stop smoking service support and services

# Next Steps/Future developments

- Adult smoking prevalence in NY is currently 9.6%, the aim is to get below 5%
- Recruitment and increase of team capacity is almost complete with one vacancy in the Harrogate area
- Transformation programme for the service focusing on:
  - Staff culture
  - Workforce development
  - Service communications
  - Review of pathways into the service
  - Conducting behavioural insights work alongside Public Health to inform the focus of our work





# **Director of Public Health Annual Report (DPHAR)**

## **Healthy Ageing**

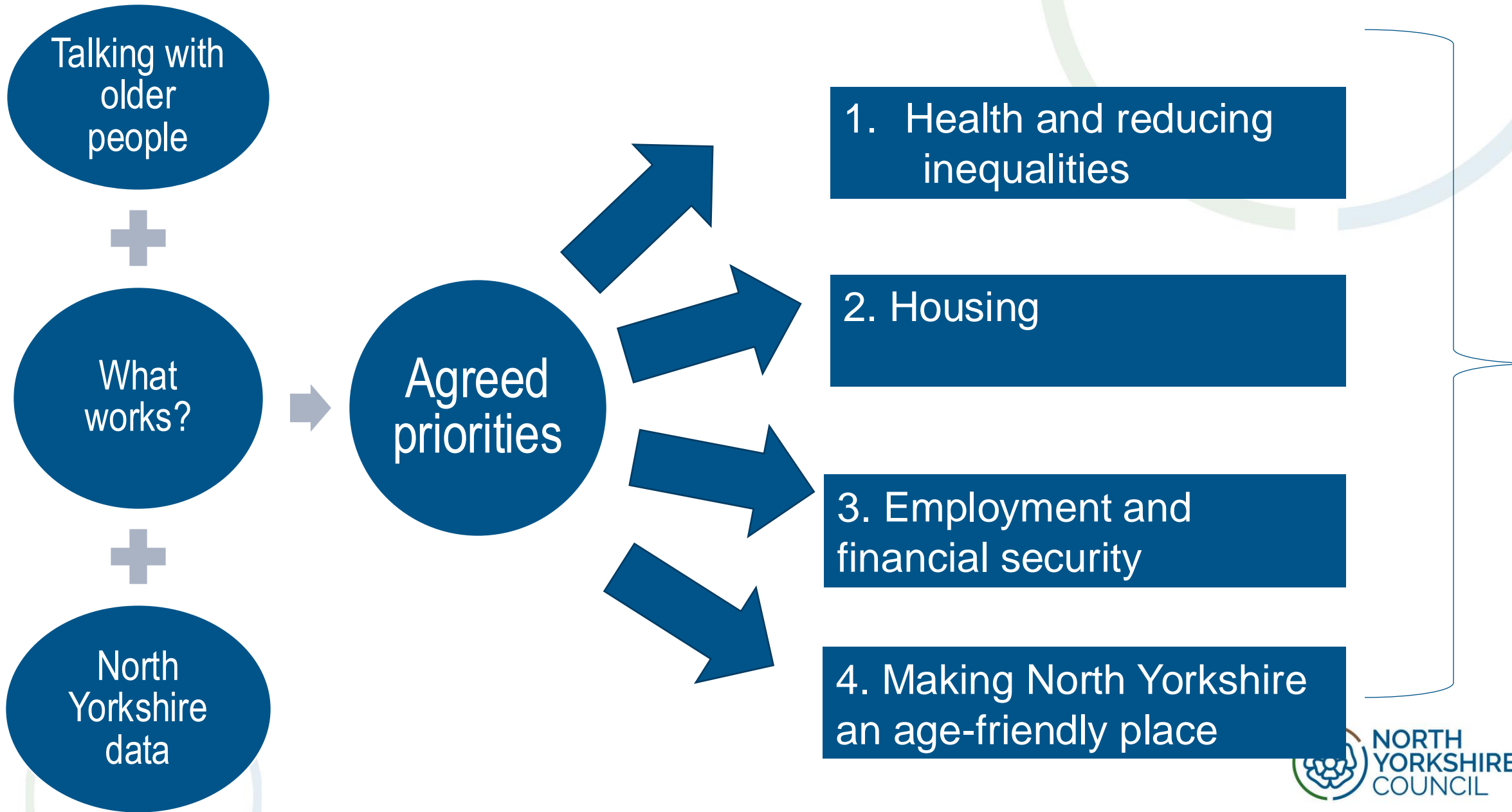
# Context

North Yorkshire has more people aged over 65 (25%) than the England average (18%) (Census 2021 data)

- will increase to 33% by 2043 (Census 2021 data)
- 49.3% of population are over 50 (Census 2021 data)
- 200,000 extra GP appointments a year needed in NY by 2035 (Humber and North Yorkshire ICB data).

CMO report: “The NHS, social care central and local government must start planning more systematically on the basis of where the population will age in the future”





# North Yorkshire is an age friendly place

- Embedding healthy ageing into work around localities – access to activities, volunteering and community anchor organisations
- Celebrating the contribution older people make – valuable not vulnerable. Challenging ageism and no more wrinkly hands pictures
- Developing intergenerational programmes
- Digital inclusion work
- Accessible venues, age friendly seating
- Work with older people to increase uptake of bus passes and access to transport
- Embedding the voice of older people in everything that we do – age-friendly network

“I sometimes find it hard to get information as phoning people is now less effective or takes a long time on hold”

“Area has a good community spirit with a lot of opportunities for different activities. This though is reliant on the hard work, enthusiasm and commitment of local organisations.”



# Any Questions?