



Sevenoaks District Health & Wellbeing Action Plan

1 April 2022 – 31 March 2023

Sevenoaks District Health and Wellbeing Action Plan 2022-23

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Introduction: A health and wellbeing strategy for Sevenoaks District

This Health and Wellbeing Action plan aims to address the health focused priorities and actions outlined within the Sevenoaks District Community Plan (2022-25).

As outlined within the Sevenoaks Council Plan, wellbeing “runs through everything we do...”. “Wellbeing” is a unifying factor that underpins all the work we do for our residents. Sevenoaks District Council aims to improve our residents “quality of life” and we aim to achieve this through:

- Providing suitable homes for people to live in.
- Ensuring that Sevenoaks remains a safe and healthy environment to live in.
- Supporting the local economy so we have access to the jobs and services we need.
- Enabling residents to make healthy lifestyle choices and access healthy lifestyle opportunities.
- Supporting residents to live independently for as long as possible.

This Health & Wellbeing Action Plan will build upon the previous Sevenoaks District Health Inequalities Action Plan (2021-22). The actions raised in this Action Plan aim to take a life-course approach (Starting Well, Living Well, Ageing Well) and to be responsive to the Health Intelligence data we have from a number of different sources.

Sevenoaks District Profile

Unless otherwise referenced, the information listed below was sourced from the Kent Public Health Observatory or the Kent County Council District Profiles The information referenced below was sourced from the Kent County Council District Profiles (2021).

Population

According to the Office of National Statistics (2018 subnational population projections) Sevenoaks District has a population of 120,829. Using this data, we can see that Sevenoaks District population is expected to rise:

- 2025; 123,996 (2.6% increase)
- 2030; 125,818 (4.13% increase)
- 2035; 127,518 (5.54% increase)
- 2040; 129,442 (7.13% increase)

The data from the Office of National Statistics breaks down projected population growth by age group. This information forecasts demographics where we are most likely to see a growth in population;

Age Group	2019 Population	2025 Population		2030 Population		2035 Population		2040 Population	
		Number	% increase from 2019	Number	% increase from 2019	Number	% increase from 2019	Number	% increase from 2019
0-19	29,083	29,881	2.7%	29,303	0.75%	28,593	-1.69%	28,668	-1.43%
20-34	17,315	16,467	-4.9%	16,489	-4.77%	17,103	-1.23%	17,853	3.11%
35-49	23,834	24,644	3.4%	25,218	5.81%	25,054	5.12%	24,064	0.96%
50-64	24,553	25,276	2.9%	24,922	1.5%	24,879	1.33%	25,709	4.71%
65+	26,044	27,728	6.5%	29,887	14.76%	31,889	22.44%	33,149	27.28%
All Ages	120,829	123,996	2.6%	125,818	4.13%	127,518	5.54%	129,442	7.13%

As is evident from the table above, it is projected that, in the years to come, the population of Sevenoaks will increase, however it is in our older population that we will expect to see the greatest annual growth. With this information, it is important to ensure that we have services in Sevenoaks District which can cater to the needs of this growing population of older residents, but also that we are implementing health improvement services so that we can prevent the onset of ill-health in older populations for as long as possible.

Diversity

The 2011 Census data indicates that Sevenoaks District is relatively homogenous with 95.8% of the District being of a White ethnic background and 4.2% of the population being of a Black, Asian and Minority Ethnic (BAME) background. This varies between different wards in Sevenoaks District from 1.8% of the population of Cowden & Hever to 9.6% of the population of Swanley St Mary's (ONS, 2011). Across all households, the 2011 Census data indicates that 3.7% may have some residents who do not speak English as their main language, this is particularly noted in Brasted, Chevening and Sundridge (2%). It may therefore be important to be mindful of how we promote our health improvement services so we can ensure an equitable opportunity of access to these services.

Socio-Economic Status

The Kent County Council ward profiles make use of the Market Segmentation tool "Mosaic UK" which is produced by Experian Ltd (2014). Mosaic segments the UK population into 15 groups and 67 subtypes, which in turn gives an understanding of where certain "groups" of residents might live in the Sevenoaks District to help target resources. Each "group" is given a profile to define the likely experiences of the residents i.e.

- Group H are more likely to order fast food or cook ready prepared meals and therefore might be more at risk of a poor diet.
- Group J are some of the most disadvantaged people in the UK, more likely to spend money on alcohol and tobacco and find it difficult to get access to fresh food produce resulting in a poorer diet. They are also generally unfamiliar with IT and internet use is low.
- Group K are also more likely to spend money on alcohol, cigarettes and convenience foods and many do not have access to a personal computer.
- Group L also have difficulties accessing information through IT and instead rely on television or physical promotion sources (newspaper or leaflets) to access local services.
- Group N are more likely to include individuals who have recently migrated to the UK and therefore might be home to residents with whom English is not their first language and additional support may be required to access local support services.

This information is available on a ward basis, so we are able to see which areas are more likely to have high proportions of these residents;

Mosaic Group	Percentage Population in Sevenoaks District	Wards where population exceeds Sevenoaks District
Group H	8.2%	Ash (32.2%) Farningham, Horton Kirby and South Darenth (26.4%) Sevenoaks Northern (18.7%) Edenbridge North and East (17.9%) Edenbridge South and West (16.3%) Dunton Green and Riverhead (11.2%)

		Crockenhill and Well Hill (9.7%) Swanley White Oaks (8.9%) Kemsing (8.6%) Swanley Christchurch and Swanley Village (8.2%)
Group J	2.8%	Sevenoaks Town and St John's (18.9%) Sevenoaks Eastern (11.6%) Dunton Green and Riverhead (11%) Westerham and Crockham Hill (4.3%) Swanley St Mary's (3.8%)
Group K	1.8%	Swanley White Oak (10.7%) Swanley St Mary's (9.5%) Edenbridge South and West (7.8%) Edenbridge North and East (5.6%) Hextable (2.5%) Swanley Christchurch and Swanley Village (2.0%)
Group L	1.1%	Swanley White Oak (5.2%) Edenbridge North and East (4.1%) Swanley Christchurch and Swanley Village (2.7%) Edenbridge South and West (2.5%) Ash (1.8%) Farningham, Horton Kirby and South Darenth (1.8%) Sevenoaks Northern (1.3%) Westerham and Crockham Hill (1.2%) Kemsing (1.1%)
Group N	3.8%	Swanley White Oak (13.8%) Swanley St Mary's (10.2%) Farningham, Horton Kirby and South Darenth (9.4%) Eynsford (8.6%) Sevenoaks Town and St John's (7.4%) Edenbridge North and East (7.2%) Crockenhill and Well Hill (6.7%) Sevenoaks Eastern (6.3%) Hartley and Hodsell Street (3.9%)

Generally, we can see a clustering of residency surrounding our major population hubs of Edenbridge, Sevenoaks Town and Swanley with some stretch into additional areas surrounding the Northern part of the district, Kemsing and Westerham and Crockham Hill. Although universal digital health information is an ever-present for all, we have identified that some populations may have limited access to digital resources. The concept of “Progressive Universalism” (ensuring that at risk populations have additional support to create equity of health outcomes), examples of this with the above-identified geographies could include:

- The application of alternate forms of advertising (posters and leaflets) to residents who are at risk of digital poverty
- Ensuring that services are easily accessible to these residents
- Linking in with community organisations that directly support any of the above target groups.

Strategies like these aim to limit the barriers of those at the greatest risk without creating insurmountable barriers to everyone else in accessing services.

Deprivation

The Indices of Multiple Deprivation 2019 indicates that there are seven Lower Super Output Areas in Sevenoaks District that are ranked within the top 40% of Deprivation nationally, two of those are ranked within the top 20% of Deprivation nationally. We understand that residents living in the lowest areas of deprivation often have limited resources to manage life’s pressures and are therefore more at risk of ill health resulting from poor health behavioural choices. As with the socio-economic data previously presented, it is important to ensure that health improvement services are reaching and are accessible to our most at risk populations.

Sevenoaks Ward	LSOA Code	LSOA Name	Deprivation Score (deciles)
Swanley St Mary's	E01024476	Sevenoaks 002A	2
Swanley St Mary's	E01024477	Sevenoaks 002B	2
Swanley White Oak	E01024480	Sevenoaks 002D	3
Swanley White Oak	E01024482	Sevenoaks 002F	3
Swanley White Oak	E01024481	Sevenoaks 002E	4
Hartley and Hodsell Street	E01024444	Sevenoaks 004D	4
Edenbridge South and West	E01024429	Sevenoaks 014E	4

Starting Well

0-19 year olds represent around 24% of the Sevenoaks District Council population. Their health and wellbeing has an impact on everyone's future. Health and wellbeing of children and young people is the result of multiple factors including; household income, education, housing, family life and healthy environment. Below we try to give a broader understanding on the factors influencing the health of children and young people and those areas that might be more at risk of a poorer start to life.

Life Expectancy at Birth (2018-2020) Sevenoaks District

For Sevenoaks District the average life expectancy for males is 82.1 years, which is better than the England value of 79.4 years. For females, the average life expectancy is 84.2 years, which again is better than the England value of 83.1 years. There has been a slight reduction in life expectancy in Sevenoaks and England by comparison to previous data collected. However, this only tells a proportion of the story.

Life Expectancy at Birth (2015-2019)

For males, we can see a 8-year age gap dependant on where in Sevenoaks you are born, this is noted between Sevenoaks Northern (79.4 years) and Cowden and Hever (87.4 years). Sevenoaks Northern (79.4 years) is the only area in the Sevenoaks District where life expectancy in males is lower than the England value.

For Females, there is also a 9-year age gap noted between Swanley White Oak (81.3 years) and Seal and Weald (90.3 years). Farningham, Horton Kirby and South Darenth (82.8 years) is the only other area in Sevenoaks where the life expectancy in women is less than the England average.

Overweight and Obesity

The prevalence of overweight (including obesity) in Year 6 children are generally lower than the England average (28.9% in Sevenoaks and 35.2% in England, 2019/20). However when we take a closer look at Sevenoaks we can see the variance that exists across the District depending on where the child lives:

- Excess weight in reception year children (ages 4-5) 2017/18-2019/20; a 19.9% difference in percentage likelihood exists between Seal and Weald (10.5%) and Hextable (30.4%).
- Obesity in reception year children (ages 4-5) 2017/18-2019/20; a 12.9% difference in percentage likelihood exists between Sevenoaks Northern (5.3%) and Crockenhill and Well Hill (18.2%).
- Excess weight in year 6 children (2017/18-2019/20); a 25.6% difference in percentage likelihood exists between Otford and Shoreham (15.4%) and Swanley St Mary's (41%).
- Obesity in year 6 children (2017/18-2019/20); a 21.63% difference in percentage likelihood exists between Sevenoaks Town & St John's (5.9%) and Swanley St Mary's (25.6%)

Excess weight and obesity is a multifaceted problem with many causes. However, breastfeeding for up to 6 months of a baby's life has links with reduced levels of obesity and cardiovascular disease for infant (and mother). Across Sevenoaks District we can see a wide range in the uptake rate in breastfeeding at the new born visit (2016-2017), from Swanley White Oak (41.98%) to Penshurst, Fordcombe and Chiddingstone (84.71%). At the 6-8 week health visitor, check (2016-2017) the rate of breastfeeding decreases and we still see wide ranging disparity in uptake depending on where mother and infant live; Swanley St Mary's (23.81%) and Penshurst, Fordcombe and Chiddingstone (70%).

Solving the rise in obesity is a complex problem with many potential solutions; however perhaps one to investigate is around increasing the ability for our Sevenoaks District Mothers to sustain breastfeeding up to the recommended 6 months post birth. This should not however ignore the importance of other solutions such as; adapting the living environment to ensure there are more healthy food outlets for young people and ensuring there is education for young people and the local community on the importance of making healthy food choices.

Exposure to Tobacco

13.5% of Sevenoaks District Mothers are defined as "Smoking" at the point of delivery (2020/21 Smoking Status at time of delivery). This value is worse than the England value of 9.6%. Smoking during pregnancy presents a number of risks to the developing baby and increases the risk of sudden infant death syndrome and stillbirth, it is also associated with low birth weight. In Sevenoaks District we can see the ranging prevalence of low birth weight (2015-19) from 2.6% in Leigh and Chiddingstone Causeway to 7% in Sevenoaks Kippington and Edenbridge South and West.

Modelled estimates from 2014 highlight that smoking prevalence for young people (aged 15) varies from 3.9% in Swanley St Mary's to 8.8% in Leigh and Chiddingstone Causeway.

Alcohol consumption

Hospital Episode Statistics used by Public Health England highlight that 24.8 (per 100,000) hospital admissions for under 18's (2017/18-2019/20) for alcohol specific conditions. This is similar to the England value of 30.7 (per 100,000). It is illegal for under 18's to purchase or be bought alcohol (unless accompanied by an adult as part of a table meal). Further work may be needed to ascertain what factors are contributing towards these hospital admissions. Alcohol consumption for under 18's can have a harmful effect on the normal development of vital organs and functions, including the brain, liver, bones and hormones, in addition to being associated with increased risks from violence, drug use, suicidal ideation and unplanned pregnancy. Further intervention maybe necessary to try to prevent the purchase of alcohol for under 18's in Sevenoaks District by working directly with the purveyors of alcohol in the District.

Poverty

Child Poverty, Income deprivation affecting children index (IDACI, 2019) shows us the variance that exists within the district between different wards in Sevenoaks. The England equivalent value is 17.1% of children are affected y income deprivation, in Sevenoaks District; Edenbridge South and West (17.1%), Swanley White Oak (28.6%) and Swanley St Mary's (32%) are equivalent to or higher than the England equivalent value.

Targeted work with Children and Young people in these areas should be pursued in order to ensure that they are able to achieve equivalent opportunities for development as other young people in Sevenoaks District despite the financial challenges they experience everyday.

Conclusions

A healthy start in life may be influenced by a wide variety of factors (many beyond the data we have available to display above). From the above data we have been able to demonstrate the variance in health outcomes that exists based on where someone is born or lives.

A targeted approach to health improvement in areas of greatest need combined with an appreciation of the wider determinant needs of the individual may be an effective approach to improving health outcomes at those most at risk and ensuring all Sevenoaks residents an equitable start to life.

Living Well

20-64 year olds represent around 54% of the Sevenoaks District Council population. As we age, our risk of developing health conditions increases, these may include (but not limited to); cardiovascular disease, stroke, high blood pressure, cancer, type 2 diabetes and Chronic Obstructive

Pulmonary Disease (COPD). However, many of these conditions are preventable (or at the very least, delay-able), enabling our residents to live their healthiest lifestyle is crucial to this Health and Wellbeing Action Plan and as a result the data presented below will look at Health Behaviour and its impact on Health Conditions.

Premature Mortality

The Kent Public Health Observatory allows us to view the premature (all causes) mortality rate (per 100,000 population) of under 75 year olds when compared with the rest of Kent (2015-2017). As previously identified, we can see that the rate is not consistent in the Sevenoaks District with 100.73 persons per 100,000 in Penshurst, Fordcombe and Chiddingstone and 385.14 per 100,000 in Swanley White Oak. This perhaps contributes towards the variance in life expectancy we noted previously in the “Starting Well” section.

We can also view premature mortality by causative disease:

- Premature mortality from cardiovascular disease of under 75 year olds when compared with the rest of Kent (2013-2017)
 - 17.58 (per 100,000) in Sevenoaks Kippington
 - 122.47 (per 100,000) in Swanley White Oak
- Premature mortality from cancer of under 75 year olds when compared with the rest of Kent (2013-2017)
 - 42.66 (per 100,000) in Penshurst, Fordcombe & Chiddingstone
 - 149.17 (per 100,000) in Crockenham and Well Hill

Smoking

Smoking prevalence in adults (aged 15+) is on a year on year decline in Sevenoaks and currently stands at 12.6% (NHS Digital 2019/20) which is better than the England value of 16.5%. However, we can still see higher prevalence in certain populations. In routine and manual occupations (ages 18-64) we can see a current smoking population of 15.1% (Annual Population Survey 2019) which is statistically similar to the England value.

Smoking is recognised to have a causative role in a wide number of health conditions, some of which are demonstrated below.

Smoking related mortality from:

- Lung Cancer (2017-19) 43.5 (per 100,000) which is better than the England value of 53 (per 100,000)
- Oral Cancer (2017-19) 2.8 (per 100,000) which is equal to the England value of 4.7 (per 100,000)
- COPD (2017-19) 38.4 (per 100,000) which is better than the England value of 50.4 (per 100,000)

Smoking related ill-health from:

- Emergency hospital admissions for COPD (2019-20) 327 (per 100,000) which is better than the England value of 415 (per 100,000)

- Lung Cancer registrations (2016-18) 59 (per 100,000) which is better than the England value of 77.9 (per 100,000)
- Oral Cancer registrations (2016-18) 12.3 (per 100,000) which is equivalent to the England value of 15 (per 100,000)
- Oesophageal cancer registrations (2016-18) 14.2 (per 100,000) which is equivalent to the England value of 15.4 (per 100,000)

With smoking prevalence decreasing, we can see the medical impact of smoking decreasing. Continued work in Smoking Cessation is needed to help facilitate a further reduction in Smoking within the Sevenoaks District perhaps with specific targets around higher prevalence populations.

Alcohol

Less than 14 units a week is generally considered to be low-risk drinking, however there is no “safe” level of alcohol consumption. Regularly drinking more than 14 units per week can lead to the development of many illnesses including; certain cancers, stroke, heart disease, liver disease, brain damage etc.

Hospital Episode Statistics used by Public Health England highlight that 479 (per 100,000) hospital admissions (2018-2019) for alcohol specific conditions. This is better than the England value of 664 (per 100,000).

Weight & Physical Inactivity

62.6% of Sevenoaks adults (18+) are classified as overweight or obese (PHE, 2019/20). This is similar to the England score of 62.8%. Living with excess weight is caused by consuming more calories, particularly those in fatty or sugary foods, than your body requires. Obesity causes physical changes and can lead to a number of serious and life-threatening medical conditions, including; type 2 diabetes, coronary heart disease, some types of cancer and stroke (among many others, we now also understand the increased risk of COVID19 for people with a higher weight).

Being physically active increases the amount of calories our bodies need, so alongside a healthy balanced diet, is an effective way of creating a calorie deficit to promote weight loss. Additionally being physically active can also lower our risk of many health conditions, including (but not limited to); diabetes, coronary heart disease, osteoarthritis, depression and dementia. The Active Lives Survey (2019/20) highlights that 70.1% of Sevenoaks adults are physically active (achieving at least 150 minutes of moderate intensity activity per week). This is statistically similar to the England score of 66.4% of adults.

Prevalence of medical conditions related to alcohol, weight and physical inactivity

There is significant overlap in the health conditions that result from higher risk alcohol consumption, living with excess weight and physical inactivity. Conditions have been grouped and presented below.

Heart Health

- Emergency hospital admissions from Cardiovascular Disease (2015/16-2017/18) range in Sevenoaks District from 429.12 (per 100,000) in Brasted, Chevening and Sundridge to 1077.65 (per 100,000) in Swanley Christchurch and Swanley Village.
- Coronary Heart Disease Prevalence (2015/16-2017/18) ranges in Sevenoaks District from 2.05% in Sevenoaks Eastern to 4.18% in Swanley St Mary's.
- Hospital admissions for Coronary Heart Disease (2015/16-2017/18) ranges in Sevenoaks District from 145.36 (per 100,000) in Sevenoaks Eastern to 472.1 (per 100,000) in Ash.
- Recorded Heart Failure prevalence (2015/16-2017/18) ranges in Sevenoaks District from 0.54% in Sevenoaks Eastern to 1.04% in Swanley St Mary's.
- Emergency hospital admissions for myocardial infarction (2013/14-2017/18) ranges in Sevenoaks District from 31.33 (per 100,000) in Sevenoaks Eastern to 145.92 (per 100,000) in Fawkham and West Kingsdown.

Stroke & Transient Ischaemic Attack (TIA)

- Stroke & TIA Prevalence (2015/16-2017/18) ranges in Sevenoaks District from 1.52% in Sevenoaks Eastern to 2.34% in Swanley St Mary's.
- Hospital admissions for Stroke (2013/14-2017/18) ranges in Sevenoaks District from 47.6 (per 100,000) in Seal and Weald to 211.93 (per 100,000) in Eynsford.

Diabetes

- Diabetes Prevalence (2015/16-2017/18) ranges in Sevenoaks District from 4.61% in Sevenoaks Eastern to 8.35% in Swanley St Mary's.
- Hospital admissions for Diabetes (2013/14-2017/18) ranges in Sevenoaks District from 30.31 (per 100,000) in Kemsing to 120.98 (per 100,000) in Hextable.
- The Diabetes diagnoses rate is 68.1% of those anticipated to have Diabetes (2018). This is below the England value of 78% and actions should be taken to improve the diabetes diagnoses rate in Sevenoaks District.

Hypertension (High Blood Pressure)

- Hypertension Prevalence (2015/16-2017/18) ranges in Sevenoaks District from 11.96% in Sevenoaks Eastern to 19.5% in Swanley St Mary's.

Cancer (excluding non-melanoma skin cancer)

- Cancer Prevalence (2015/16-2017/18) ranges in Sevenoaks District from 2.58% in Sevenoaks Northern to 3.72% in Halstead, Knockholt and Badgers Mount.

Mental Health

It is believed that one in four adults and one in 10 children experience mental illness. Conditions can range from common (anxiety, depression) to more serious mental health conditions (psychoses, schizophrenia, bipolar affective disorder). In the Sevenoaks District we can see a slight change in the prevalence of serious mental health conditions, this ranges from 0.52% in Kemsing to 0.82% in Swanley St Mary's.

With respect to hospital admissions for mental health conditions (2013/14-2017/18) we can also see a range of prevalence depending on the location in Sevenoaks District, from 97.84 (per 100,000) in Otford and Shoreham to 256.64 (per 100,000) in Swanley St Mary's.

Hospital Episode Statistics (2019/20) highlight a rate of 187.5 (per 100,000) in Sevenoaks District for emergency hospital admissions for intentional self-harm. This is statistically similar to the England value of 192.6 (per 100,000).

Lastly, the Office of National Statistics (2017-19) highlight a rate of 6.8 per 100,000 for suicide. This is statistically similar to the England rate of 10.1 per 100,000.

Sevenoaks District Council's Mental Health Strategy (2021) focuses of five priorities:

1. More people will have good mental health
2. More people with mental health problems will have good physical health
3. More people will have a positive experience of care and support
4. Fewer people will suffer avoidable harm
5. Fewer people will experience stigma and discrimination

The actions outlined within this action plan will aim to support the priorities outlined within the Mental Health Strategy (2021)

Cancer Screening

KPHO also provides information on the Cancer screening rate respective of the different wards in Sevenoaks District. Once again, we can see variance in the uptake rates dependent on where the client resides in Sevenoaks:

- Bowel Cancer Screening (aged 60-74) of those screening within the last 30 months (2014/15-2016/17). Swanley St Mary's has a screening rate of 56.75% whereas Eynsford has a screening rate of 64.73%
- Breast Cancer Screening (aged 50-74) of those screening within the last 36 months (2014/15-2016/17). Sevenoaks Kippington has a screening rate of 70.36% whereas Eynsford has a screening rate of 78.48%

- Cervical Cancer Screening (aged 25-64) of those screening between 2014/15 – 2016/17. Swanley St Mary's has a screening rate of 75.72% whereas Eynsford has a screening rate of 84.34%

Poverty

Statistics from DWP (2020) helps us to identify which wards in Sevenoaks District are more likely to have residents in receipt of Universal Credit. The average for Sevenoaks District in 2016 was 1.9%. Focusing our attention on those with above average rates, we can identify the following areas:

- Swanley St Mary's (6.5%)
- Swanley White Oak (5%)
- Swanley Christchurch and Swanley Village (2.4%)
- Crockenhill and Well Hill (2.3%)
- Fawkham and West Kingsdown (2.3%)
- Farningham, Horton Kirby and South Darenth (2.2%)
- Edenbridge South and West (2.1%)
- Hextable (2%)
- Otford and Shoreham (2%)

It is estimated that residents of Penshurst, Fordcombe and Chiddingstone (12.4%) and Cowden and Hever (12.6%) are more likely than the England average (10.3%) to experience fuel poverty (PHE, 2018). Residents in Swanley St Mary's (3.4%) are more likely than the England average (2.8%) to be unemployed and claiming out of work benefit and 3.4 (per 1000) residents of Leigh and Chiddingstone Causeway are likely to be in long-term unemployment, which is more than the equivalent England rate (3.2 per 1000) (PHE 2019/20).

Conclusions

In this section, we highlighted the prevalence of certain health conditions within the Sevenoaks District and further highlighted the differences that exist in health outcomes between Sevenoaks residents depending on where they live. The health conditions highlighted are (for the majority) preventable through the adoption of positive health behaviours, which is demonstrated by the year on year reduction in Smoking with the reduction in the prevalence of associated conditions.

Actions should focus on maintaining support services that support the adoption of good health behaviours in addition to targeting services at the areas of highest need.

Ageing Well

People in England can now expect to live longer than ever before, but unfortunately, these additional years might not be spent in good health with many developing medical conditions that will affect quality of life. Sevenoaks is an ageing District, according to Kent County Council the number of people aged 65+ is forecast to rise by 14.76% by 2030. As such, supporting and enabling our older residents to stay fit and healthy is a major priority for Sevenoaks District.

There are some medical conditions that are more prevalent in the older generation, these include; dementia, fall related hip fracture and winter death associated to poorly maintained, colder homes. With the anticipated population rise, it is important the Sevenoaks District is vigilant to the needs of our older residents and provides services that can address this potentially growing problem.

Life Expectancy at 65

2013-2017 data on Life Expectancy at 65 follows a similar trend to that noted in previous sections. A resident can expect to live for different amount of years depending on where they live. For males, this ranges from an additional 17.28 years in Swanley White Oak to 22.86 years in Halstead, Knockholt and Badgers Mount. For females, this ranges from an additional 19.98 years in Farningham, Horton Kirby and South Darenth to 27.95 years in Seal and Weald. The factors surrounding this may have been already identified in our “Living Well” section where we see higher rates of life limiting medical conditions caused by the uptake of negative health behaviours.

Causes of mortality 65+

The Kent Public Health Observatory allows us to view the premature (all causes) mortality rate (per 100,000 population) of over 65 year olds when compared with the rest of Kent (2015-2017). As previously identified, we can see that the rate is not consistent in the Sevenoaks District with 2480.7 persons per 100,000 in Halstead, Knockholt and Badgers Mount and 4946.02 per 100,000 in Sevenoaks Northern.

We can also view premature mortality by causative disease:

- Premature mortality from cardiovascular disease of over 65 year olds when compared with the rest of Kent (2013-2017)
 - 81.46 (per 100,000) in Brasted, Cheving and Sundridge
 - 1702.73 (per 100,000) in Sevenoaks Northern
- Premature mortality from cancer of over 65 year olds when compared with the rest of Kent (2015-2017)
 - 429.62 (per 100,000) in Penshurst, Fordcombe & Chiddingstone
 - 1385.62 (per 100,000) in Hartley and Hodsell Street
- Premature mortality from respiratory disease of over 65 year olds when compared with the rest of Kent (2013-2017)
 - 243.5 (per 100,000) in Seal and Weald
 - 901.29 (per 100,000) in Leigh and Chiddingstone Causeway

Dementia

Dementia is syndrome associated with an ongoing decline in cognitive functioning. This can include problems with; memory, understanding, mood, movement, language (amongst others).

The recorded prevalence of Dementia (2015/16-2017/18) shows some variance depending on where people live, from 0.59% in Cowden and Hever to 1% in Dunton Green and Riverhead. Unfortunately, Sevenoaks District is performing worse when compared to England for Dementia diagnosis rate of 65+ residents (2021), with the Sevenoaks percentage diagnosis at 57.6% and the England percentage diagnosis at 61.6%.

Actions must be made to improve the diagnosis rate of dementia for Sevenoaks District residents where possible to support treatment for this condition as early as possible.

Falls Prevention

For older residents, the impact of a fall can be life changing. Older people are at an increased risk of having a fall due to; balance problems and muscle weakness, vision loss, other health conditions (heart disease, dementia or low blood pressure). In Sevenoaks District, 584 65+ residents (per 100,000) had a hip fracture (2019/20). This is statistically similar to the England rate of 572 (per 100,000).

Emergency hospital admission due to falls in people aged 65+ (2015/16-2017/18) varies from 1497.98 (per 100,000) in Seal and Weald to 3408.76 (per 100,000) in Crockenhill and Well Hill.

Emergency hospital admission due to hip fracture in people aged 65+ (2013/14-2017/18) varies from 310.22 (per 100,000) in Seal and Weald to 971.54 (per 100,000) in Hextable.

The prevention of falls and subsequent injury caused by the fall is an important action for Sevenoaks District considering the growing older population. This could take the form of supporting the physical stability of our residents or changing the landscape of Sevenoaks District to limit the risk of falls.

Excess winter deaths

This rate indicates the amount of deaths that occur during the winter that would not have been usually expected throughout the course of the year. They are generally associated with the reduced temperature and our older residents who are more adversely affected by fuel poverty and medical conditions that result from lower temperatures.

In Sevenoaks District, we can see a rate of 15% (ONS, 2018-19) which is statistically similar to the England rate of 15.1%. With a growing older population it will become increasingly important to make sure our older Sevenoaks residents are able to stay well each winter and have the resources they need to keep a warm, safe home.

Poverty

The older people in poverty: Income deprivation affecting older people index (IDAOPI, 2019) highlights the differences that exist between wards in Sevenoaks District from Halstead, Knockholt and Badgers Mount (4.1%) and Swanley St Mary's (15.4%). Swanley White Oak and Swanley St Mary's represent the only two wards where residents are at greater risk of income deprivation by comparison to the England average.

Conclusions

With a growing older population, it will be increasingly important that Sevenoaks District is ensuring an adequate provision of services to meet the needs of our older residents. In accordance with the Council Plan, we want to ensure that Sevenoaks residents are supported to live independently for as long as possible. Preventing falls, promoting sociability and physical activity, ensuring residents homes are suitable for their needs and improving the diagnoses rate of dementia are just some of the actions that could be taken to help our older residents to age well.

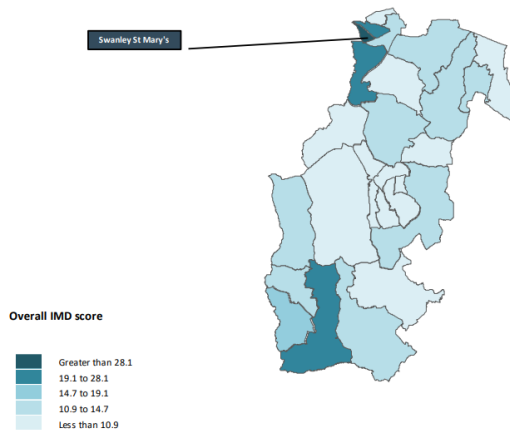
Health Inequalities

“Health inequalities are unfair and avoidable differences in health across the population, and between different groups within society. Health inequalities arise because of the conditions in which we are born, live, work and age. These conditions influence our opportunities for good health, and how we think, feel and act, and this shapes our mental health, physical health and wellbeing” NHS England.

As we have already noted there is a 9-year age gap in the life expectancy of males and females living in different wards in Sevenoaks. It is believed that the deprivation of an area could have a major contributing impact on the health outcomes of residents.

Index of Multiple Deprivation (IMD): by electoral ward

Overall IMD score, population weighted quintile, 2019



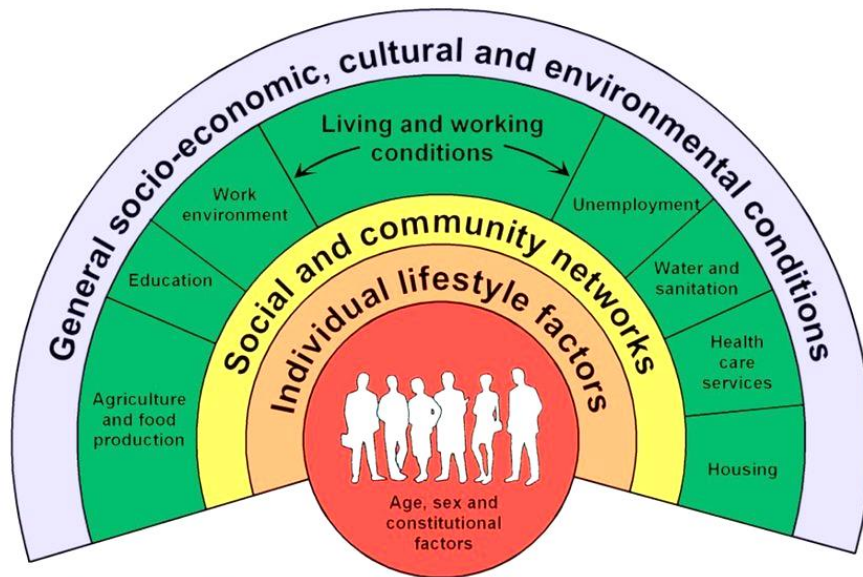
Source: DCLG, prepared by KPHO (MP), Oct-19

In the map above, we see Swanley St Mary's, Swanley White Oak, Crockenhill and Well Hill and Cowden and Hever highlighted as the more deprived regions of Sevenoaks District.

Throughout this Action Plan, we have identified many differences between different wards in Sevenoaks in relation to the likelihood of living with certain health conditions or even succumbing to premature mortality. Whilst no causal link with deprivation is evident, there are certainly trends that demonstrate that our residents living in areas of deprivation or within target groups will be more at risk of poorer health outcomes and negative health behaviours than less deprived areas.

Wider Determinants of Health

It is now widely recognised that our health is determined by a much wider range of factors other than just health care. These include how and if people can access employment, social, housing and other environmental factors of where they live.



Source: Dahlgren and Whitehead, 1991

It is important to reiterate that wellbeing “runs through everything we do...”.

Sevenoaks District Council provides a range of services that support and address the “Wider Determinants of Health” for our residents on a daily basis.

It is hoped that this Action Plan can contribute towards improvements in the Health and Wellbeing of all Sevenoaks residents whilst supporting a reduction in Health Inequalities that exist within the District. We must not forget the importance of identifying and addressing wider determinants of health which may stand in the way of the health and wellbeing of Sevenoaks residents.

Objectives and Actions

Our objectives follow the same themes identified above; Starting Well, Living Well, Ageing Well. Our subsequent actions are led primarily from the data presented in this action plan. The Sevenoaks District Health Action Team will be made up of representatives of organisations that:

- Support Sevenoaks residents.
- Can contribute to the achievement of the actions outlined in this action plan.

Through the partnership work of the Health Action Team, we might identify gaps in service provision or gain additional insight on the needs of Sevenoaks District residents. The Health Action Team will work in partnership to address these gaps and respond to these needs.

Ref	2022-23 Priority Action	Lead Agency	Other Partners
Starting Well Actions			
SW1	Support a reduction in obesity and excess weight in children	KCHFT School Health Team	
SW2	Enable Sevenoaks District Mothers to maintain breastfeeding for the first 6 months of their child's life	KCHFT Health Visiting Service	
SW3	Support a smokefree home for Sevenoaks residents and enable more Sevenoaks Mothers to quit smoking during pregnancy	KCHFT Smoking Cessation Service	
SW4	Prevent the illegal consumption of alcohol in under 18's and subsequent hospital admissions resulting from excessive alcohol consumption	Kenward Trust	Sevenoaks District Council Licensing Team
SW5	Support Sevenoaks children and young people to adopt healthy lifestyle choices.	KCHFT School Health Team	
Living Well Actions			
LW1	Continue to provide services that contribute towards the reduction of smoking in Sevenoaks District with particular targeting for at-risk groups.	KCHFT Smoking Cessation Service	
LW2	Improve the diagnosis rate of Diabetes for Sevenoaks residents	KCHFT NHS Health Check Service	
LW3	Encourage more Sevenoaks residents to consume alcohol within lower risk levels and limit hospital admissions for alcohol specific conditions	Change, Grow, Live	Sevenoaks District Council Health Team KCHFT One You Team
LW4	Support Sevenoaks adults to adopt healthy lifestyle choices that facilitate weight loss and increases in physical activity	Sevenoaks District Council Health Team	Sencio Everyone Active
LW5	Adapt the physical design of Sevenoaks District so that healthy lifestyle choices become a routine part of residents lives	Sevenoaks District Council Planning Team	Sevenoaks District Council Health Team
LW6	Provide adapted health improvement services targeted at specific populations (where needed) to ensure all residents can benefit from good physical health	Involve Kent	Sencio Everyone Active

LW7	Encourage Sevenoaks District businesses and organisations to consider the Health and Wellbeing of their organisation and employees	Kent & Medway Healthy Workplaces Programme	Sevenoaks District Council Health Team
LW8	Promote Cancer Screening initiatives to encourage more residents to take up Cancer screening when eligible.	All Organisations	
Ageing Well Actions			
AW1	Improve the diagnosis rate of dementia in the district	Unknown at this stage	
AW2	Provide specialist services targeted at improving the quality of life of residents affected by dementia	Sevenoaks Area Dementia Friendly Community & Swanley Area Dementia Friendly Community	
AW3	Work with older residents to prevent falls and limit the potential for hip fracture in older residents	Involve Kent, West Kent Falls Prevention Service & Virgin Care Falls Team	Age UK Sevenoaks & Tonbridge Sevenoaks District Health Team Sencio Everyone Active
AW4	Ensure residents can receive support to stay safe, healthy and independent in their own homes for as long as possible	Sevenoaks District Council Private Sector Housing Team	
AW5	Promote the importance of staying well at winter in older populations	Sevenoaks District Council Health Team	All Public Supporting Organisations
All Life Courses			
ALL1	Target services towards areas and residents of greatest need without preventing all residents from accessing support.	All Organisations delivering client centred services	
ALL2	Enable more professionals to have conversations with residents on health and wellbeing	Kent County Council - MECC	
ALL3	Ensure non-digital advertising is employed to promote services to those residents with limited digital access.	All Organisations delivering client centred services	
ALL4	Support the reduction of wider determinants of health that can have a negative impact on resident's mental health.	Imago Community and Involve Kent	
ALL6	Encourage more client-facing organisations to engage in Mental Health Awareness and Mental Health First Aid training	West Kent Mind & North Kent Mind	

If you are supporting Sevenoaks residents and feel you could support in the achievement of our actions then we would welcome hearing from you and welcoming you to the Health Action Team, please contact Sevenoaks District Council via; healthy.living@sevenoaks.gov.uk

Membership of the Health Action Team 2022-23 and contact details

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Everyone Active Web: https://www.everyoneactive.com/	Involve Kent 30 Turkey Court, Ashford Road, Maidstone, ME14 5PP Tel: 03000 810005 Web: https://www.involvekent.org.uk/	Imago Community John Spare House, 17-19 Monson Road, Tunbridge Wells, Kent, TN1 1LS Tel: 01892 530330 Web: https://www.imago.community/
Kent Community Health Foundation Trust (KCHFT) Web: https://www.kentcht.nhs.uk/	Kent County Council County Hall, Maidstone, ME14 1XQ Tel: 0300 041 4141 Web: https://www.kent.gov.uk/	Kent & Medway Healthy Workplaces Programme Gun Wharf, Dock Road, Chatham, ME4 4TR Tel: 01634 334 307
Kenward Trust Kenward Road, Yalding, Kent, ME18 6AH Tel: 01622 814187 Web: https://www.kenwardtrust.org.uk/	North Kent Mind The Almshouses, 20 West Hill, Dartford, DA1 2EP Tel: 01322 291380 Web: https://northkentmind.co.uk/	Sencio Buckhurst Lane, Sevenoaks, Kent, TN13 1LW Web: https://www.sencio.org.uk/
Sevenoaks Area Dementia Friendly Community Argyle Road, Sevenoaks, Kent, TN13 1GP Tel: 01732 447055	Swanley Area Dementia Friendly Community	Virgin Care Falls Team Gravesend Community Hospital, Bath Street, Gravesend, DA11 0DG
West Kent Falls Prevention Coxheath Centre, Coxheath, ME17 4AH		

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