

Scrutiny Panel - Environment & Quality of Life



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11th April 2022

A meeting of **The Scrutiny Panel - Environment & Quality of Life** will be held in **remotely via Zoom** on **Thursday, 21 April 2022 at 2.00 pm.**

Emma Denny
Democratic Services Manager

To Councillors: Mr H Blathwayt, Dr V Holliday, Mr J Rest, Mr A Varley and Ms L Withington

Officers: Maxine Collis and Matthew Stembrowicz

For information to: all other Members



**If you have any special requirements in order
to attend this meeting, please let us know in advance**
If you would like any document in large print, audio, Braille, alternative format or in
a different language please contact us

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A G E N D A

1. APOLOGIES

To receive any apologies for absence.

2. MINUTES

1 - 6

To approve minutes of the meeting held on 24th March 2022.

3. DECLARATIONS OF INTEREST

7 - 12

Members are asked at this stage to declare any interests that they may have in any of the following items on the agenda. The Code of Conduct for Members requires that declarations include the nature of the interest and whether it is a disclosable pecuniary interest (see attached guidance and flowchart).

4. ITEMS OF URGENT BUSINESS

To determine any other items of business which the Chairman decides should be considered as a matter of urgency pursuant to Section 100B(4)(b) of the Local Government Act 1972.

5. QUALITY OF LIFE STRATEGY

13 - 60

To review the Quality of Life Strategy and consider any requirement for amendments and/or recommendations to Cabinet.

6. BUSINESS FOR NEXT MEETING

To agree items of business for the next meeting.

7. EXCLUSION OF THE PRESS AND PUBLIC

To pass the following resolution, if necessary:

“That under Section 100A(4) of the Local Government Act 1972 the press and public be excluded from the meeting for the following item of business on the grounds that they involve the likely disclosure of exempt information as defined in paragraphs _ of Part I of Schedule 12A (as amended) to the Act.”

SCRUTINY PANEL - ENVIRONMENT & QUALITY OF LIFE

Minutes of the meeting of the Scrutiny Panel - Environment & Quality of Life held on Thursday, 24 March 2022 in the remotely via Zoom at 2.30 pm

Committee Members Present: Mr H Blathwayt Dr V Holliday
Mr J Rest Ms L Withington

Officers in Attendance: Corporate Programme & Project Manager (CPPM), Environmental Services Manager (ESM) and Democratic Services and Governance Officer - Scrutiny (DSGOS)

Also in attendance: External Surveyor of Public Conveniences (ESPC)

19 APOLOGIES

None received.

20 MINUTES

Minutes of the meeting held on 24th February 2022 were approved as a correct record and signed by the Chairman.

21 ACTIONS ARISING FROM THE MINUTES

- i. The DSGOS referred to actions identified within the minutes and noted that he had discussed the potential for location categories with the CPPM. The CPPM suggested that it would be difficult to categorise public conveniences in the same way as car parks, though they could be potentially be categorised according to usage. Cllr H Blathwayt suggested a separate identification for public conveniences on the Broads, due to their own varying seasonality, and noted that it would be helpful for Members to review the potential categories in advance of the next meeting.
- ii. The DSGOS noted that the next action was to contact Parish and Town Councils to improve the Council's understanding of public perceptions of its public conveniences. It was noted that a small number of responses had been received which were generally positive, whilst other Councils were expected to discuss the matter at their next meeting.
- iii. The final actions related to identifying potential savings from the cleansing contract, and outlining anticipated cleansing costs for changing places facilities. The ESM stated that each public convenience had an associated cost for cleansing within the contract, and it was possible that individual savings could be made. He added that cleansing of changing places facilities would be determined on a case by case basis, with indicative costs available once the size and specification was known. It was noted that adding changing places facilities to existing public convenience locations was not expected to generate significant additional cleansing costs.

ACTIONS

1. CPPM to share potential categorisation spreadsheet.

22 DECLARATIONS OF INTEREST

None.

23 ITEMS OF URGENT BUSINESS

None.

24 PUBLIC CONVENIENCE STANDARDS

The Chairman introduced the item and informed Members that an external surveyor of public conveniences (ESPC) had been invited to discuss public convenience standards across the Country. The CPPM stated that whilst the Council regularly undertook conditions surveys, it had not previously assessed its public conveniences from a customer point of view. She added that the Loo of the Year Awards did outline specific standards, but it was also useful to understand what others authorities across the Country provided.

Questions and Discussion

- i. The ESPC informed Members that the Loo of the Year Awards had been established as a commercial entity approximately 25 years ago with the aim of raising the standard of public conveniences across the Country. He added that the standards they set covered issues such as lighting, access arrangements, and offering a range of amenities at each facility. It was noted that for North Norfolk a one size fits all approach was unlikely, as the toilets varied significantly by location. The ESPC noted that many areas across the country had resorted to charging for public convenience use, and had also removed lobby areas in order to deter anti-social behaviour, in addition to reducing costs for lighting, heat and cleansing, with the space instead used for additional cubicles.
- ii. The CPPM stated that charging for public conveniences was not an option that the Council were looking to pursue, but asked whether other authorities had taken this approach to support the improvement of facilities, or to generate additional income. The ESPC replied that public conveniences charges were unlikely to generate surplus income, but fees were generally used to offset management and maintenance costs. The CPPM asked whether paying customers expected higher standards as a result, to which the ESPC replied that customers expected public conveniences to be clean and safe, but not necessarily finished to a higher standard. He added that generally speaking NNDC already appeared to meet these standards, though not necessarily in the most cost-effective way. It was noted for instance that automatic opening and closure of facilities could improve service efficiency and lower costs.
- iii. Cllr J Rest noted that the District had areas with mobile network service, and asked whether this would affect any automated systems. He added that it was also Council policy that car parking charges be used to help fund onsite public conveniences. The ESPC noted that usage often declined in areas where local authorities charged for use of public conveniences. The Chairman asked whether charging authorities provided free usage for disabled and changing places facilities, or whether these were charged at the

same rate. The ESPC replied that whilst these facilities were accessed via different means, they usually had similar charging arrangements in place.

- iv. The ESPC suggested that it would be helpful if the Council properly understood the usage levels of its public conveniences, as well as any key patterns of usage. He added that with this information, the Council would be able to better determine the level of equipment required at each facility, the number of facilities required in each location, and the best opening times. It was suggested that this would help prioritise resources and investment was evidence based.
- v. The Chairman asked whether there was any benefit in installing gender neutral facilities, with direct access cubicles. The ESPC replied that whilst assurances would need to be sought to ensure parity of facilities, allocation of cubicles only came down to signage, as internal fittings would be identical, with any allocations able to be determined on a case by case basis. He added that overall it provided greater flexibility during the peak tourism season, and the option of limited closures during winter. The CPPM noted that some of the Council's new facilities had been built as cubicles, which could be opened and closed individually for repairs or maintenance. She added that whilst there had been some complaints during the initial installation of gender neutral toilets, no further complaints had been received. The ESPC noted that cubicles may not be the best option for very high usage areas, but they did offer the best solution for long-term management and cost efficiencies. Cllr L Withington stated that she was not aware of any issues with the gender neutral toilets in Sheringham, and suggested that it would be possible to close cubicles during periods of low demand, so long as disabled access toilets remained open.
- vi. The ESPC referred to automatic locking systems and noted that high usage levels required fittings to be able to withstand significant strain, which meant they were more expensive, especially in exposed sea front locations. The ESM noted that weathering in coastal locations did cause issues, and in many cases toilet doors had to be made of materials able to withstand the environment, such as galvanised steel. The ESPC stated that there were various materials and fittings available to withstand these conditions, and noted that orientation was also important, as this could be altered to reduce vulnerabilities.
- vii. The ESPC stated that standardising fittings across public conveniences would simplify maintenance and repairs, which would further help to reduce operational costs. It was noted that many of the Councils recently built or refurbished facilities had included new fixtures and fittings, and it was evident that there was considerable scope for standardisation. The ESM noted that in previous years the Environmental Services Team had held responsibility for maintenance, and had kept stock of a number of spare or replacement parts. He added that there was a variety of different sized papers and hand towels in use, which would benefit from standardisation.
- viii. Cllr J Rest asked whether it would be worthwhile selling advertising space within the Council's public conveniences. The ESPC replied that it was unlikely that advertising revenue would generate any significant income, but local businesses may be interested. He added that one of the best means for generating income from public conveniences was to let adjoining spaces to hatch cafes or similar businesses, which would also reduce vandalism and

other antisocial behaviour. The ESM noted that some public bins had presented an opportunity for advertising income, and this could be explored further.

- ix. The CPPM stated that Property Services had sought to standardise plumbing fixings in public conveniences, and suggested that beyond setting standards, it was important to ensure joint consultation between services when designing new facilities.
- x. The Chairman asked whether there were any nationally recognised requirements relative to the number of public convenience users. The ESPC replied that requirements were generally location and usage pattern specific, and usage data would be required to determine this. Cllr L Withington stated that regardless of usage levels, it was important to ensure that the Council's public conveniences were dementia accessible.
- xi. The Chairman noted that current usage data was collected in 2019, and asked whether this would be more reliable than data collected during the Pandemic, given the increase in local tourism. The ESPC replied that it was difficult to know whether usage would return to pre-pandemic levels, but the more data the better.
- xii. Cllr L Withington asked whether it would be possible to determine standards based on location, or whether this would be unrealistic. The ESPC replied that a range of variables had to be considered, with some facilities requiring 'off-grid' toilets where drainage was an issue. Cllr V Holliday noted that the existing 'off-grid' toilet installed by the Council had suffered problems due to high usage, which had significantly limited its ability to process waste. It was noted that this style of toilet relied on evaporation, which had not been possible due to excess additional liquids being poured into the system.

AGREED

- 1. Potential list of standards to be summarised for consideration at future meeting.**

25 EXCLUSION OF THE PRESS AND PUBLIC

It was proposed by Cllr J Rest and seconded by Cllr L Withington to exclude the press and public to discuss exempt information included within the asset register.

RESOLVED

That under Section 100A(4) of the Local Government Act 1972 the press and public be excluded from the meeting for the following item of business on the grounds that they involve the likely disclosure of exempt information as defined in paragraphs 3 of Part I of Schedule 12A (as amended) to the Act.

26 PUBLIC CONVENIENCE LOCATIONS AND ASSET REGISTER

The DSGOS informed Members that officers responsible for managing the asset register were not available to attend the meeting, however the data had been provided and any questions could be responded to in writing.

Questions and Discussion

- i. It was noted that the columns referred to asset NBV, land NBV and the total value with ownership arrangements outlined on the register.
- ii. The Chairman noted that there was a significant disparity between valuations of the Council's public conveniences dependent on their location and size. It was noted that some select sites had not been included on the register, as they formed part of a larger asset.
- iii. Members discussed the value and location of an asset and suggested that more information would be required from officers if any proposals such as relocation were to be considered. It was noted that there appeared to be other discrepancies that would require an explanation from officers.
- iv. Cllr V Holliday asked whether it would be possible to monitor usage of various locations identified within the register using alternative methods. It was suggested that this may be possible, but data would be unreliable. Existing usage data was discussed and it was suggested that it provided a reasonable indication of usage as it covered a six month period. The costs of the usage surveys were discussed and it was noted that more data had been provided than originally planned.
- v. Cllr L Withington referred to a high usage public convenience not owned by the Council and suggested that it would be helpful if possible, to understand usage of this facility amongst others, as it would have an impact on usage of the Council's own facilities.
- vi. Members agree that it would be helpful to review the asset register again when officers were available to provide context and further information.

AGREED

- 1. Asset register to be reviewed again at May meeting when officers are available to provide context and further information.**

27 TO AGREE ITEMS OF BUSINESS FOR THE NEXT MEETING

- i. The DSGOS informed Members that the Quality of Life Strategy had been drafted and that in order for it to be considered for approval by Cabinet in May or June, it was necessary for the Panel to review the Strategy in April, which would mean deferring discussion of public conveniences. It was suggested that a summary of the public convenience standards discussed could be brought to the May meeting for consideration to form part of the Panel's final recommendations.
- ii. Cllr V Holliday asked whether it was worth undertaking any additional usage surveys, on the basis that discussion was being deferred until May. The CPPM replied that a full survey would take twelve months to complete, and this timeframe may not be practical within the current time constraints of the review. The Chairman noted that he was relatively satisfied with the existing usage data, though higher usage levels may continue after the Pandemic. The DSGOS noted the earlier suggestion that existing data could be multiplied by 1.45 to estimate expected usage if staycations continued at their current rate. The Chairman asked whether further usage data could be gathered from utilities or consumables, though Members accepted that this

would be unreliable data.

- iii. The CPPM suggested that standards and options could be summarised for agreement at the next meeting, to include issues such as accessibility and a potential preference for the removal of lobby spaces. She added that this would be important to ensure that new facilities were built to an agreed standard, with an opportunity for all relevant services to feed into the process, in addition to seeking customer feedback. It was noted that funds made available for data collection could be used to survey the condition of toilets from a user perspective. Cllr H Blathwayt suggested that it would be helpful to explore the options and level of revenue that could be generated from charging in high tourism areas, even if only to rule out the option. Cllr L Withington suggested that it would also be helpful to have the costs and potential savings of automatic locking systems evaluated within a summary report.
- iv. Cllr V Holliday asked whether there were any other aspects of the public convenience management that were yet to be considered prior to agreement of recommendations. The DSGOS replied that the Panel were yet to consider sustainability and cost reduction, and it was likely that Property Services would be required to feed into this discussion with regards to equipment and fittings. Cllr H Blathwayt suggested it could also be useful to invite Cllr E Spagnola to a future meeting, to provide input on accessible and changing places facilities.

AGREED

- 1. April meeting to review the Quality of Life Strategy.**
- 2. May meeting to reconsider location and asset values, sustainability and cost reduction options available for public conveniences.**
- 3. Summary report with appraisal of available public convenience options to be prepared for May meeting to help form recommendations.**

The meeting ended at 4.13 pm.

Chairman

Registering interests

Within 28 days of becoming a member or your re-election or re-appointment to office you must register with the Monitoring Officer the interests which fall within the categories set out in **Table 1 (Disclosable Pecuniary Interests)** which are as described in "The Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012". You should also register details of your other personal interests which fall within the categories set out in **Table 2 (Other Registerable Interests)**.

"Disclosable Pecuniary Interest" means an interest of yourself, or of your partner if you are aware of your partner's interest, within the descriptions set out in Table 1 below.

"Partner" means a spouse or civil partner, or a person with whom you are living as husband or wife, or a person with whom you are living as if you are civil partners.

1. You must ensure that your register of interests is kept up-to-date and within 28 days of becoming aware of any new interest, or of any change to a registered interest, notify the Monitoring Officer.
2. A 'sensitive interest' is as an interest which, if disclosed, could lead to the councillor, or a person connected with the councillor, being subject to violence or intimidation.
3. Where you have a 'sensitive interest' you must notify the Monitoring Officer with the reasons why you believe it is a sensitive interest. If the Monitoring Officer agrees they will withhold the interest from the public register.

Non participation in case of disclosable pecuniary interest

4. Where a matter arises at a meeting which directly relates to one of your Disclosable Pecuniary Interests as set out in **Table 1**, you must disclose the interest, not participate in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest', you do not have to disclose the nature of the interest, just that you have an interest. Dispensation may be granted in limited circumstances, to enable you to participate and vote on a matter in which you have a disclosable pecuniary interest.
5. Where you have a disclosable pecuniary interest on a matter to be considered or is being considered by you as a Cabinet member in exercise of your executive function, you must notify the Monitoring Officer of the interest and must not take any steps or further steps in the matter apart from arranging for someone else to deal with it

Disclosure of Other Registerable Interests

6. Where a matter arises at a meeting which **directly relates** to one of your Other Registerable Interests (as set out in **Table 2**), you must disclose the interest. You may speak on the matter only if members of the public are also allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest', you do not have to disclose the nature of the interest.

Disclosure of Non-Registerable Interests

7. Where a matter arises at a meeting which **directly relates** to your financial interest or well-being (and is not a Disclosable Pecuniary Interest set out in Table 1) or a financial interest or well-being of a relative or close associate, you must disclose the interest. You may speak on the matter only if members of the public are also allowed to speak at the meeting. Otherwise you must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest', you do not have to disclose the nature of the interest.
8. Where a matter arises at a meeting which **affects** –
 - a. your own financial interest or well-being;
 - b. a financial interest or well-being of a relative, close associate; or
 - c. a body included in those you need to disclose under Other Registrable Interests as set out in **Table 2**

you must disclose the interest. In order to determine whether you can remain in the meeting after disclosing your interest the following test should be applied

9. Where a matter **affects** your financial interest or well-being:
 - a. to a greater extent than it affects the financial interests of the majority of inhabitants of the ward affected by the decision and;
 - b. a reasonable member of the public knowing all the facts would believe that it would affect your view of the wider public interest

You may speak on the matter only if members of the public are also allowed to speak at the meeting. Otherwise you must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation.

If it is a 'sensitive interest', you do not have to disclose the nature of the interest.

10. Where you have a personal interest in any business of your authority and you have made an executive decision in relation to that business, you must make sure that any written statement of that decision records the existence and nature of your interest.

Table 1: Disclosable Pecuniary Interests

This table sets out the explanation of Disclosable Pecuniary Interests as set out in the [Relevant Authorities \(Disclosable Pecuniary Interests\) Regulations 2012](#).

Subject	Description
Employment, office, trade, profession or vocation	Any employment, office, trade, profession or vocation carried on for profit or gain. [Any unpaid directorship.]
Sponsorship	Any payment or provision of any other financial benefit (other than from the council) made to the councillor during the previous 12-month period for expenses incurred by him/her in carrying out his/her duties as a councillor, or towards his/her election expenses. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992.
Contracts	Any contract made between the councillor or his/her spouse or civil partner or the person with whom the

	<p>councillor is living as if they were spouses/civil partners (or a firm in which such person is a partner, or an incorporated body of which such person is a director* or a body that such person has a beneficial interest in the securities of*) and the council —</p> <p>(a) under which goods or services are to be provided or works are to be executed; and</p> <p>(b) which has not been fully discharged.</p>
Land and Property	<p>Any beneficial interest in land which is within the area of the council.</p> <p>'Land' excludes an easement, servitude, interest or right in or over land which does not give the councillor or his/her spouse or civil partner or the person with whom the councillor is living as if they were spouses/civil partners (alone or jointly with another) a right to occupy or to receive income.</p>
Licenses	<p>Any licence (alone or jointly with others) to occupy land in the area of the council for a month or longer</p>
Corporate tenancies	<p>Any tenancy where (to the councillor's knowledge)—</p> <p>(a) the landlord is the council; and</p> <p>(b) the tenant is a body that the councillor, or his/her spouse or civil partner or the person with whom the councillor is living as if they were spouses/civil partners is a partner of or a director* of or has a beneficial interest in the securities* of.</p>
Securities	<p>Any beneficial interest in securities* of a body where—</p> <p>(a) that body (to the councillor's knowledge) has a place of business or land in the area of the council; and</p> <p>(b) either—</p> <p>(i) the total nominal value of the securities* exceeds £25,000 or one hundredth of the total issued share capital of that body; or</p> <p>(ii) if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which the councillor, or his/her spouse or civil partner or the person with whom the councillor is living as if they were</p>

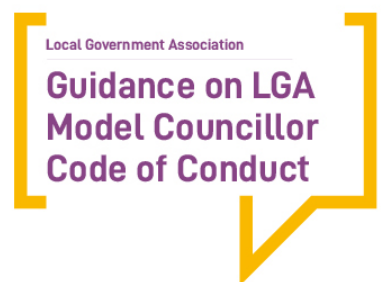
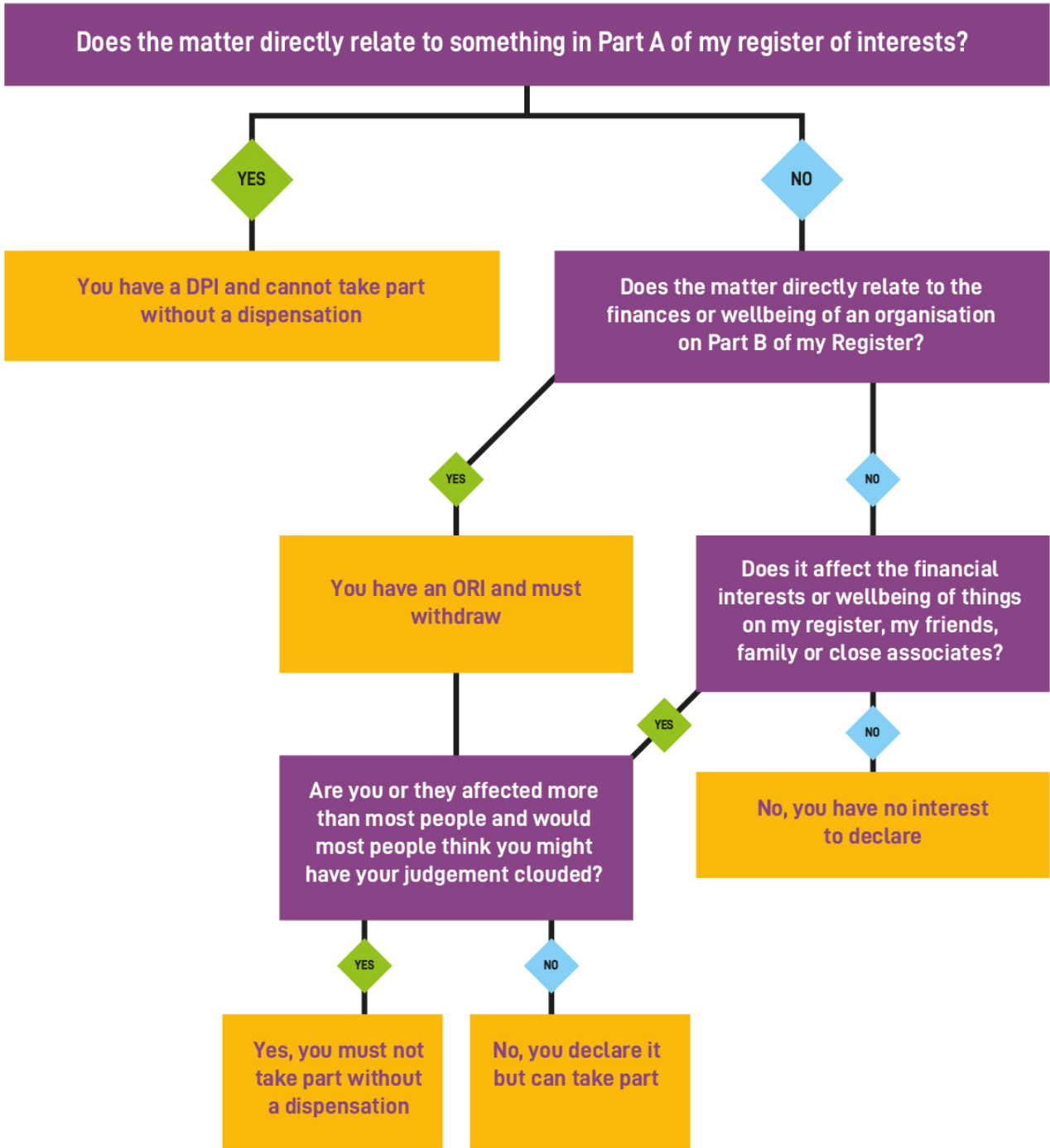
	spouses/civil partners has a beneficial interest exceeds one hundredth of the total issued share capital of that class.
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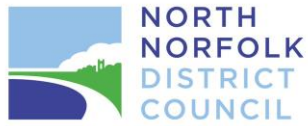
* 'director' includes a member of the committee of management of an industrial and provident society.

* 'securities' means shares, debentures, debenture stock, loan stock, bonds, units of a collective investment scheme within the meaning of the Financial Services and Markets Act 2000 and other securities of any description, other than money deposited with a building society.

Table 2: Other Registrable Interests

<p>You have a personal interest in any business of your authority where it relates to or is likely to affect:</p> <ul style="list-style-type: none"> a) any body of which you are in general control or management and to which you are nominated or appointed by your authority b) any body <ul style="list-style-type: none"> (i) exercising functions of a public nature (ii) any body directed to charitable purposes or (iii) one of whose principal purposes includes the influence of public opinion or policy (including any political party or trade union)
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North Norfolk District Council

Quality of Life Strategy

2022 - 2024

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Introduction

Background

The Council's Corporate Plan 2019 – 2023 sets out the Council's priorities. Quality of Life is one of the Council's six priorities. The Council recognises that whilst the majority of the residents of the District enjoy a good quality of life, the rurality and coastal location does present some challenges for our residents.

Public transport in large parts of the district is limited and expensive and those without personal transport will find it difficult to access a wide variety of public services. The younger and older members of our community along with those experiencing poor health or disability will feel the greatest impact. This will limit the opportunity of younger people in accessing post-16 education and jobs. It will also limit opportunities for their social interaction.

The District has an ageing population with the highest average age of any local authority area in England (48 years 11 months). The District Council is committed to improving the wellbeing of the older people in our community enabling them to live independently and enjoy opportunities for social interaction to prevent loneliness.

The Council is committed to maintaining and enhancing its sports and leisure facilities; beaches and open spaces; tourist infrastructure and public conveniences and supporting cultural events which form an essential element of the District's appeal as a place to live and visit and which have a positive impact on the mental wellbeing of residents.

The Council recognises the need to work in partnership with a wide range of agencies to provide support to and improve the quality of life of our most vulnerable residents. It supports this through active engagement in multi-agency partnership arrangements, integration of services and effective referral arrangements and shared office arrangements.

The Purpose of the Quality of Life Strategy

This Quality of Life Strategy sets out the Council's priorities for Quality of Life. It also sets out the actions the Council intends to take to improve quality of life in the District.

- The Council's Corporate Plan objectives set out the key priority areas for Quality of Life, many of the actions linked to these objectives have been completed
- Our deeper exploration and understanding of quality of life and consideration of available evidence along with current national and international issues has identified some additional areas for action

The Strategy includes the actions and interventions which the Council will undertake to deliver the key priorities for Quality of Life and where it will seek to work in partnership with other statutory agencies, voluntary and community groups and residents.

Links to Other Strategies and Policies

The Quality of Life Strategy has links with a wide range of other Council strategies and policies. In preparing the Quality of Life Strategy we consulted with internal stakeholders.

Our aim is to ensure that we do not duplicate other strategies and policies and that the Quality of Life Strategy aligns with those strategies and policies.

Other strategies and policies that have links to the Quality of Life Strategy include; Local Plans (existing and emerging), Environmental Charter, Net Zero Strategy, Tree Planting Strategy, Housing Strategy, Homelessness and Rough Sleepers Strategy, Sports Strategy, Play Strategy, Customer Service Strategy, Customer Charter, Economic Growth Strategy, Equality, Diversity and Inclusion Policy and Welfare Benefit and Take-Up Strategy.

North Norfolk District Council is a partner of the Norfolk and Waveney Health and Wellbeing Board and is a signatory of the Joint Health and Wellbeing Strategy 2018-2022.

Structure of the Quality of Life Strategy

The Quality of Life Strategy has two main elements:

1. The process for developing the Strategy taking the Corporate Plan as a framework and looking at evidence of quality of life locally.
2. The proposed actions and intervention which the Council will undertake. We group these actions by quality of life theme:
 - Sustainability (and Energy Use)
 - Education and Learning
 - People and communities (and participation)
 - Transport and connectivity
 - Mental Health and Isolation
 - Housing
 - Covid Response and Recovery
 - Cost of Living
 - Levelling Up
 - Ukranian Refugee Resettlement
 - Working in Partnership

Developing the Quality of Life Strategy

We have developed the Quality of Life Strategy through:

1. Understanding what is meant by Quality of Life
2. Consideration of the wider determinants of health and links to Quality of Life
3. Analysis of evidence on the needs and challenges in the District which fall under the umbrella of Quality of Life
4. Reviewing the Council's Corporate Plan Objectives and current activity related to Quality of Life
5. Consultation with internal stakeholders.

Understanding what is meant by Quality of Life

The World Health Organisation defines quality of life as an individual's perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns.

We are aware that our residents will experience differing levels of quality of life at a point in time and over the course of their lives and this will be influenced by a number of factors including wealth, age, ill health and disability, ability to access services, isolation and control over their life.

This strategy seeks to focus on quality of life at a District population level rather than an individual level although the 'business as usual' services delivered by the Council and its partners have the ability to have a profound impact on the quality of life of individual residents and members of a household.

We have undertaken research to understand the issues relating to quality of life and have found the following to be most useful in developing our strategy and action plan.

Centre for Thriving Places – Thriving Places Index

The Thriving Places Index (TPI) measures the drivers of wellbeing at a Local Authority level using a broad set of indicators selected from datasets produced by reputable sources such as the Office for National Statistics (ONS), Public Health England (PHE) and the Index of Multiple Deprivation (IMD). Indicators selected, measure or provide a proxy for the key factors known to have an influence on wellbeing. It enables wellbeing to be considered in the round rather than simply in a health context.

The TPI is published at Local Authority level covering both single-tier and two-tier Local Authorities. All of the data is secondary data not usually published at geographies lower than Local Authority level – there are some exceptions, such as indicators from the IMD which go down to Lower Super Output Area (LSOA) level.

The Index identifies **local conditions** for wellbeing (is the Local Authority creating the right conditions for wellbeing?) and measures whether those conditions are being delivered **equally** (is wellbeing delivered fairly across the local area?) and **sustainably** (is wellbeing being delivered sustainably?).

Each Local Authority area has a scorecard which shows the colour-coded scores for headline elements, domains and subdomains, with scores ranging from 0–10. Medium scores which are the same or very similar to the England average are coloured yellow; above or below averages scores are coloured in pale green and orange respectively; and

very high or low scores are coloured in dark green and dark red respectively. A high score doesn't necessarily mean a place is doing as well as it possibly could on what is being captured by that element, domain or subdomain, but that it is doing better than other places (appendix 1).

Data is available for most of the indicators for 2019, 2020 and 2021 which allows for comparison over time. We are doing well compared to the England average in the headline of Equality, the domains of Income, Green Infrastructure and Gender and the subdomains of Safety, Healthy and risky Behaviours, Mortality and Life Expectancy and Community Cohesion. We are doing less well compared to the England average in the headline of Sustainability, the domains of Energy Use, Education and Learning and People and Community and the subdomains of Transport, Mental Health, Participation, Housing, Adult Education and Child Education (appendix 2).

We have taken the areas where we are doing less well in North Norfolk compared to the England average (and which therefore suggest we need to improve) and these have been included in our list of Big Issues.

[Thriving Places Index | Centre for Thriving Places](#)

Co-op Community Wellbeing Index

The Co-op Community Wellbeing Index (CWI) is the first measure of wellbeing at a local level across all four nations of the UK, with data covering more than 28,000 communities. The CWI allows users to view wellbeing scores across a range of different indicators from the quality of education, housing affordability and public transport links in an area, to the amount of green space and the number of community centres that are present providing a useful snapshot into the strengths and challenges facing each community.

The scores are displayed as between 0–100 with a high score representing a community that has scored well for a particular measure.

In developing the framework the Co-op worked with members of the public through workshops to understand what community wellbeing meant to them and to explore the key themes that contribute to a sense of leading a good life. In addition they reviewed evidence, frameworks and measures that already existed within the field of wellbeing and spoke to industry experts. The index has 3 pillars (People, Place and Relationships) and 9 domains that sit beneath these (3 per pillar) and one overall wellbeing score per community. There are over 50 different indicators within the index and for the vast majority data comes from open sources. The data is refreshed once a year to ensure that the information that it contains remains accurate, relevant and as up to date as possible (appendix 3).

The data is used by the Co-op to help understand more about how and where they should be targeting their work within communities and this has been made available as a tool for local authorities.

We see this as a useful tool to drill down at a grass roots level to explore quality of life further at a parish level alongside a new approach to Community Engagement. This will also provide a monitoring tool to see if and how quality of life is changing and allow us to undertake some further work to see how this is impacting across all parts of the local communities.

[Home | Wellbeing Index \(coop.co.uk\)](#)

Annual Population Survey

The Office for National Statistics as part of its Annual Residents Survey uses four survey questions – known as the ONS4 – to measure personal well-being and averages the scores for each of the questions. The respondent scores each of the questions on a scale of 0 to 10 where 0 is ‘not at all’ and 10 is ‘completely’.

Measure	Question	North Norfolk score (results to 31/03/2021)
Life satisfaction	Overall, how satisfied are you with your life nowadays?	7.74
Worthwhile	Overall, to what extent do you feel that the things you do in your life are worthwhile?	7.83
Happiness	Overall, how happy did you feel yesterday?	7.62
Anxiety	On a scale where 0 is ‘not at all anxious’ and 10 is ‘completely anxious’, overall, how anxious did you feel yesterday?	2.6

[Personal well-being user guidance - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk/personal-well-being-user-guidance)

The Eastern Daily Press ran an article with the latest results for Norfolk (up to 31/03/2021). The article also included graphs with results for Happiness, Life Satisfaction and Worthwhile over the last 10 years (appendix 4).

It was reported in the article that personal wellbeing in England during the first and second wave of the coronavirus pandemic was among the lowest levels recorded since the survey was launched in 2011.

People living in North Norfolk were the least anxious in the county.

The Quality of Life Foundation

The Quality of Life Foundation is a charitable organisation committed to creating greater accountability and encouraging more sustainable models of development by making health and wellbeing central to the way we create and care for our homes and neighbourhoods. They describe quality of life as a person’s physical, social and psychological wellbeing and the level to which individuals may feel their lives to be happy, active, sociable, interesting and meaningful. It encompasses a multiplicity of desirable conditions that are overlapping and have different scales.

This can also be understood as a hierarchy of needs from shelter, food and safety up to belonging, self-esteem and self-actualisation as described by Maslow (Maslow, 1943, pp.370–396).

The Quality of Life Foundation commissioned a literature review and undertook research to explore the effect of the built environment on our quality of life and developed a framework through which practical steps could be taken to make a difference. They identified six themes with each having three sub themes.

Control <ul style="list-style-type: none"> • Influence • Safety 	Health <ul style="list-style-type: none"> • Housing • Air Quality 	Nature <ul style="list-style-type: none"> • Green Space • Interaction
--	--	--

<ul style="list-style-type: none"> • Permanence 	<ul style="list-style-type: none"> • Recreation 	<ul style="list-style-type: none"> • Environment
Wonder <ul style="list-style-type: none"> • Culture • Distinctiveness • Playfulness 	Movement <ul style="list-style-type: none"> • Walking and Cycling • Public Transport • Cars 	Belonging <ul style="list-style-type: none"> • Diversity • Neighbourliness • Services

[PD20-0742-QOLF-Framework_v09_LR.pdf](#)

The Wider Determinants of Health and Health Inequalities

Our health is determined by a range of factors, these include:

- Age and genetic factors
- Health behaviours
- Socio-economic factors
- The built environment
- Clinical care

The social, economic and environmental factors are known as wider determinants of health. These influence our health more than other factors and many of them may be influenced by the work of the District Council. The differences in the care that people receive and the opportunities they have to lead healthy lives, can lead to differences in health outcomes and these are termed health inequalities (appendix 5 – Understanding the wider determinants of health).

The Marmot Review

Sir Michael Marmot was asked in 2008 by the then Secretary of State for Health to chair an independent review to propose the most effective evidence-based strategies for reducing health inequalities in England. The final report 'Fair Society Healthy Lives' published in February 2010 concluded that reducing health inequalities would require action on six policy objectives:

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

The Marmot Review describes how the social gradient on health inequalities is reflected in the social gradient on educational attainment, employment, income, quality of neighbourhood and so on. The Marmot Review stresses the importance of taking a life course perspective and recognising that disadvantage accumulates throughout life. It follows that those that do not get the best start in life are less likely to experience a good quality of life.

We therefore need to ensure our approach is designed to address the needs of all; children and young people as well as working age adults and older people.

[fair-society-healthy-lives-full-report-pdf.pdf \(instituteofhealthequity.org\)](#)

The Institute of Health Equity undertook a review in 2020 to mark 10 years from this landmark study. The report highlights that;

- People can expect to spend more of their lives in poor health
- Improvements to life expectancy have stalled and declined for the poorest 10% of women
- The health gap has grown between wealthy and deprived areas
- Place matters and has an impact on life expectancy (hence why the new arrangements for Health and Wellbeing Partnerships are at a district council level).

[Health Equity in England: The Marmot Review 10 Years On - The Health Foundation](#)

There have been two major reports in recent months which highlight the need for specific focus on action to reduce the impact of health inequalities on coastal and rural communities – Chris Whitty, Chief Medical Officer’s Annual Report 2021, Health in Coastal Communities and the report of the All Party Parliamentary Group, Rural Health and Care, February 2022.

Health in Coastal Communities – Chief Medical Officer’s Annual Report 2021

The central argument of this report is that *the health challenges of coastal towns, cities and other communities are serious, and their drivers are more similar than their nearest inland neighbour. This means a national strategy to address the repeated problems of health in coastal communities is needed in addition to local action. If the health problems of coastal communities are not tackled vigorously and systematically there will be a long tail of preventable ill health which will get worse as current populations age.*

The report identifies that *there are many reasons for poor health outcomes in coastal communities. The pleasant environment attracts older, retired citizens to settle, who inevitably have more and increasing health problems. An oversupply of guest housing has led to Houses of Multiple Occupation which lead to concentrations of deprivation and ill health. The sea is a benefit but also a barrier: attracting NHS and social care staff to peripheral areas is harder, catchment areas for health services are artificially foreshortened and transport is often limited, in turn limiting job opportunities. Many coastal communities were created around a single industry such as previous versions of tourism, or fishing, or port work that have since moved on, meaning work can often be scarce or seasonal.*

Given the known high rates of preventable illness in these areas, the lack of available data on the health of coastal communities has been highlighted by the report with coastal communities having been long neglected and overlooked with limited research on their health and wellbeing. The focus has tended towards inner city or rural areas with too little attention given to the nation’s periphery. Data is rarely published at a geographical level granular enough to capture coastal outcomes, with most data only available at local authority or Clinical Commissioning Group (CCG) level. As a result, deprivation and ill health at the coast is hidden by relative affluence just inland which is lumped together. The report explores the experiences of local leaders, along with analysis of what data exist, to help understand the health and wellbeing of coastal communities.

Coastal communities are not homogenous, and each is shaped by its own unique history and culture. They do, however, share many similar characteristics, which lend to the development of common policy responses. A need has been identified for a national strategy informed by common groups, and underpinned by local actions aligned with a sustained evidence is needed to help tackle health inequalities in these areas.

The report highlights *the significant strengths in coastal communities along with many exemplary and impressive examples of local work taking place to support the health of local*

citizens. The vulnerability of these communities is not a new revelation, and the economic problems they face have been highlighted in several recent reports including in relation to the impact of COVID-19.

[Chief Medical Officer's Annual Report 2021 - Health in Coastal Communities \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

All Party Parliamentary Group (APPG) Rural Health and Care – Parliamentary Inquiry February 2022

The report highlights that for too long people in rural and coastal areas have experienced poorer access to health and social care services than their counterparts in cities and towns. For many, the prospects of a healthy life are also worse, somewhat at odds with the perceived benefits of living the idyllic rural life.

It acknowledges that it is often more difficult to provide services to dispersed populations or those living in more remote coastal communities with provision of services generally being poorer than in more heavily populated parts of the country. Public transport is often a major impediment to accessing health and social care, not just for patients but also for staff travelling to work. Cars have become essential for most people living in sparsely populated communities with many more households owning a car than in urban areas. Ironically, vehicle ownership is often seen as a measure of affluence, rather than a necessity and cars owned in rural settings are on average older and less energy efficient. Similarly, housing is also more expensive (excluding London), often less well maintained and again less energy efficient. Poorer educational provision and facilities for young people, fewer day centres for those of more advanced years, lack lustre digital connectivity, poor housing stock, and economic uncertainty in agricultural and agrarian industries all influence the health and wellbeing of rural residents. It is not just access to healthcare that is compromised, but the very determinants of health itself.

In essence, rural residents are disadvantaged throughout the life-course compared to their urban counterparts. Access to maternity care is more problematical; the wider community services for children and young people are less accessible; primary and secondary care are less readily available for people of working age, including preventative and screening services; and the provision of both health and social services for the growing proportion of older citizens is increasingly inadequate. We are not offering equal care for all in England, despite the commitment to do so.

Three of the 12 recommendations are particularly relevant to Local Authorities looking to address issues linked to quality of life;

Recommendation 1: Rurality and its infrastructure must be redefined to allow a better understanding of how it impinges on health outcomes

Recommendation 4: “Rural health” proof housing, transport and technology policy

Recommendation 12: Empower the community and voluntary sector to own prevention and wellbeing

[RuralHealthandCareAPPGInquiryRep.pdf \(rsnonline.org.uk\)](https://rsnonline.org.uk)

We know from our exploration of quality of life that health and health inequalities are significant factors and the conclusions and recommendations of these reports will help us to shape our actions in addressing quality of life

We can see how our actions delivered part of our Quality of Life Strategy will also have implications for our work on Health and Wellbeing and will support our leadership role in the setting up and development of the new Health and Wellbeing Partnership for the North Norfolk district. We will soon be turning our focus to the development of a Health and Wellbeing Strategy to influence our activity in addressing health inequalities and promoting healthy lifestyles and in turn hope to be able to harness the resources of the wider partnership to support this work.

North Norfolk Health Profiles

The Health Profiles for the District produced by Public Health colleagues highlight the areas of concern when comparing the data for North Norfolk (selected area – black bar) compared to Norfolk and England.

[Health & wellbeing profiles - JSNA - Norfolk Insight](#)

Population and Life Expectancy

Norfolk Health and Wellbeing Profiles
Population and Life Expectancy

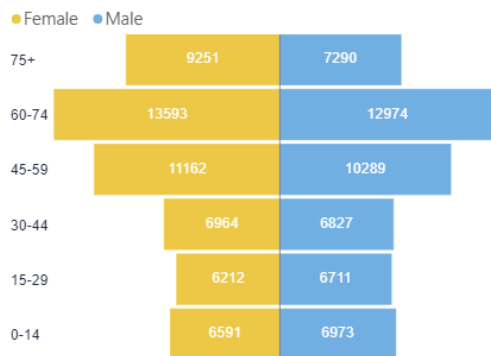
Select your district area: Multiple selections
Select your electoral division (or district) area: North Norfolk



Population

Total number of residents in this area: 104800

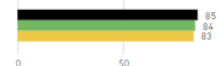
Population pyramid:



Icons from FlatIcons.com

Life Expectancy (LE)

The average life expectancy of a woman in this area is: 85 years



The average life expectancy of a man in this area is: 81 years



Healthy Life Expectancy (HLE)

This indicator is an important summary measure of mortality and morbidity in itself. HLE shows the years a person can expect to live in good health (rather than with a disability or in poor health). This is only available at a Norfolk level. In Norfolk both men and women are expected to live to age 63 in good health.

This means that in this district, women can expect to live 22 years in poor health on average, and men can expect to live 17 years in poor health on average.



Although life expectancy in the District is better than that of both Norfolk and England, there is concern that these additional years are likely to be spent in poor health and that this will not only reduce the quality of life of the individuals concerned but could reduce the quality of life more generally at a community level as greater pressure is placed on services and in particular health and social care services.

Early Years

We know how important getting off to a good start in life is. The early years development indicator shows that children in North Norfolk are not getting off to as good a start as those in Norfolk and England and this is likely to affect life opportunities in later years.

Norfolk Health and Wellbeing Profiles Early Years

Population

Every year around 680 babies are born in this area. There are approximately 4000 children aged 0-4 in this area. They make up 4% of the population (the Norfolk average is 5%).

Breastfeeding

There is evidence that babies who are breast fed experience lower levels of gastro-intestinal and respiratory infection.

In this area:



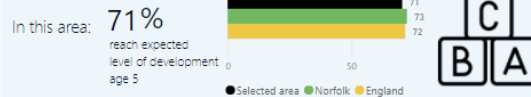
Icons from FlatIcons.com

Select your district area:

Select your electoral division (or distict) area:

A good level of development

This is a key measure of early years development across a wide range of developmental areas (physical development; and communication and language, and the early learning goals in the specific areas of mathematics and literacy).



Accident and Injury hospital admissions

Injuries are a leading cause of hospitalisation and one of the main causes of premature mortality for children. They are also a source of long-term health issues, including mental health related to experience(s).

In this area:



There are approximately 115 children from this area (aged 0-14) admitted to hospital for accidents and injuries over the last 1 year/s.

Children and Young People

GCSE attainment is lower than for Norfolk and England and although low in number there is some concern over the number of teenage pregnancies in the District.

Norfolk Health and Wellbeing Profiles Children and Young People

There are approximately 14000 children aged 5-19 in this area. They make up 13% of the population (the Norfolk average is 16% of the population).

GCSE Attainment

Children's education and development of skills contributes to the individual's and community resilience.



Not in Education Employment or Training (NEET)

Young people who are not in education, employment or training are at greater risk of a range of negative outcomes, including poor health, depression or early parenthood.

On average in Norfolk 3.8% of 17 and 18 year olds are NEET. In this area it is:



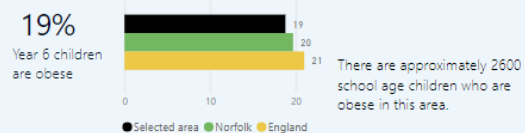
Icons from FlatIcons.com

Select your district area:

Select your electoral division (or distict) area:

Healthy Weight

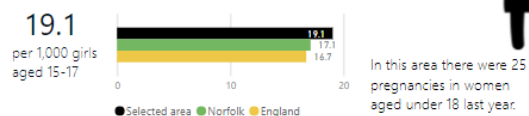
There is concern about the rise of childhood obesity and the implications of obesity continuing into adulthood. As children get older, the risk of obesity in adulthood and future obesity-related ill health is increased.



Teenage Pregnancy

Most teenage pregnancies are unplanned and around half end in an abortion. While it can be positive for some, for many teenagers bringing up a child is extremely difficult and often results in poor outcomes for both the teenage parent and the child.

NOTE: Teenage pregnancy data is not available at electoral division level



Adult Lifestyles

The percentage of residents in the District who smoke is lower than in Norfolk but higher than in England.

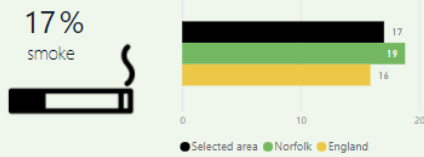
Norfolk Health and Wellbeing Profiles Adult Lifestyle

There are approximately 52100 adults aged 20-64 living in this area, they make up 50% of the population (the Norfolk average is 54% of the population).

Central government's prevention strategy states that healthy choices are not always easy or obvious. There is a role for local authorities and partners to create the environment that makes healthy choices as easy as possible.

Smoking

Smoking is a major risk factor for many diseases, such as lung cancer, chronic obstructive pulmonary disease (COPD) and heart disease. Smoking is the leading cause of premature deaths.



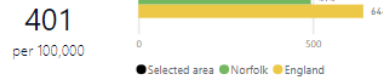
There are approximately 8900 people who are smokers in this area.

Select your district area:

Select your electoral division (or district) area:

Alcohol

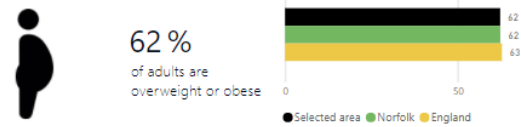
Alcohol is England's second biggest cause of premature deaths behind tobacco. Alcohol consumption is a contributing factor to hospital admissions and deaths from a diverse range of conditions.



Over the last 1 year/s there were 485 hospital admissions for alcohol specific conditions from this area.

Healthy Weight

Excess weight in adults is recognised as a major determinant of premature mortality and avoidable ill health.



There are approximately 32500 people who are overweight or obese in this area.

Icons from FlatIcons.com

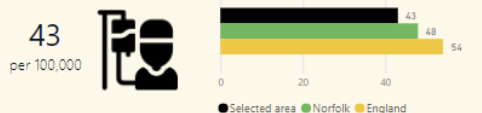
Long term conditions

The percentage of the population in the District suffering from musculoskeletal conditions is significantly higher than in both Norfolk and England. The rate of suicide in the District is also of concern.

Norfolk Health and Wellbeing Profiles Long-Term Conditions

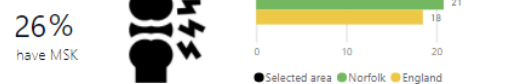
Research shows that the top four causes of ill health in Norfolk are:

Cancer - Rate of Preventable Cancer deaths:



Over the last 3 years there have been 175 residents from this area who have died from cancer that was considered to be preventable.

Musculoskeletal - % of population suffering MSK conditions (conditions affect the bones, joints, muscles and spine)



There are approximately 22700 people with musculoskeletal conditions.

Cardiovascular (Heart) Disease - Rate of All CVD deaths:



Over the last 3 years there have been 233 residents from this area who have died from cardiovascular disease.

Mental Health - Rate of Suicide deaths:



Over the last 1 year/s there have been 34 residents from this area who have died by suicide.

Icons from FlatIcons.com

Older People

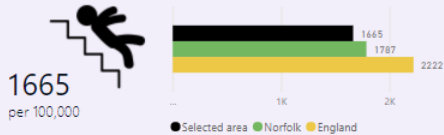
The proportion of the population aged 65 and over is significantly higher than the Norfolk figure at 33% and 25% respectively.

Norfolk Health and Wellbeing Profiles Older People

There are approximately 34800 people aged 65 and over living in this area, they make up 33% of the population (the Norfolk average is 25% of the population).

Hospital Admissions due to falls

Falls are the main cause of emergency hospital admissions for older people and significantly impact on long term outcomes. This is because they are a major contributor to people moving from their own home to assisted living.



In the last 1 years there were 625 hospital admissions due to falls from residents aged 65+ from this area.

Select your district area:

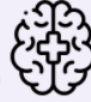
Select your electoral division (or distict) area:



Dementia

Dementia is the main cause of late-life disability.

4% of adults 65+ have dementia

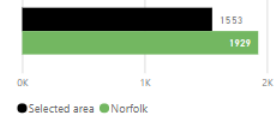


There are approximately 1340 people aged 65+ living with dementia in this area.

Older People in Residential Social Care

A significant life event that happens to many people in older age is going into residential social care.

1553 per 100,000



There are around 540 older people living in NCC nursing or residential care in this area.

Icons from FlatIcons.com

Deprivation and Crime

Crime levels in the District are lower than in Norfolk.

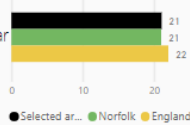
Norfolk Health and Wellbeing Profiles Deprivation and Crime

Deprivation and Poverty

Evidence says that people living in the most deprived areas face the worse health inequalities in relation to health access, experiences and outcomes.

What defines whether an area is a deprived area is based on a number of characteristics included in the 'Index of Multiple Deprivation' – including income, employment, education and training; health and disability; crime; barriers to housing and services; and living environment.

The level of deprivation in this area is similar to the Norfolk average.



North Norfolk ranks 127 out of the 317 LA districts in England (where 1 is the most deprived).

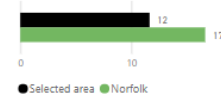
None of the neighbourhoods in North Norfolk are considered to be amongst the most deprived neighbourhoods in the country, but that does not mean that some people are not experiencing deprivation.

Crime and Antisocial Behaviour

Antisocial behaviour

Last year there were 1222 recorded antisocial behaviour incidents in this area.

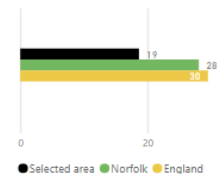
12 per 1,000



Violent Crime

Last year there were 1952 recorded violent crimes in this area.

19 per 1,000



Domestic Abuse

Awaiting data

The Corporate Plan

Quality of Life is a key priority for North Norfolk District Council with a focus on supporting our communities to be strong and vibrant with a particular emphasis on accessibility and provision of services, encouraging activity and healthier lifestyles and promoting general wellbeing and positive mental health through investing in our cultural heritage and our natural assets.

One of the six themes within the current Corporate Plan is Quality of Life and within this theme there are a number of objectives most of which have been either completed or significantly progressed. The progress is summarised at appendix 6 to:

- Reassure stakeholders of action the Council is already taking (and therefore show where it is not necessary to include new action in the Quality of Life Strategy).
- Identify the resources already used to deliver quality of life objectives and which could, potentially be re-allocated (if current activity were stopped/reduced) to generate capacity for newer and higher priority Quality of Life actions.

Many of the other objectives under the other five Corporate Plan themes also contribute to quality of life, in order to avoid duplication we have made links to these areas rather than providing further commentary.

In addition the Council undertakes a wide range of activity supporting quality of life. This 'business as usual' activity and existing projects do not form part of the strategy.

[nndc-corporate-plan-2019-to-2023.pdf \(north-norfolk.gov.uk\)](https://www.norfolk.gov.uk/media/1000000/nndc-corporate-plan-2019-to-2023.pdf)

Consultation with stakeholders

We have decided to defer plans to undertake a Quality of Life survey of our residents (an action within our Corporate Plan). This will now form a key strand in our ongoing strategy development and will be held over to inform the next strategy hence why this strategy has a shorter time period for its focus and delivery.

In January 2022 we formed a project group of internal stakeholders to inform the development of the Quality of Life Strategy. The group met three times over the course of the next three months. In addition key groups have been consulted during the strategy development process including the Operational Management Team and Management Team.

The Council recognises the importance of wider stakeholder consultation and is currently developing a Community Engagement Strategy. The Council will seek endorsement of its strategy through a number of routes including the Town and Parish Council Forum, the soon to be formed Health and Wellbeing Partnership and through grass roots engagement with communities over the strategy period. The Council will fully embed its community engagement framework to ensure robust stakeholder consultation for the subsequent strategy in 2024.

The Big Issues for North Norfolk

These are the headline issues identified from analysis of quality of life indicators for the District along with the current and pressing issues being faced by the nation as we start to move towards recovery from the Covid pandemic.

Sustainability

Sustainability covers a range of indicators including CO2 Emissions, Energy Consumption, Household Waste Generation, Household Recycling, Housing Energy Efficiency, Renewable Electricity Generation, Land Use Change and Tree Cover. In 2019 and 2020 our performance against these indicators was similar to the England average but in 2021 dropped to worse than the England average.

Indicators relating to **Energy Use** including Co2 Emissions and Energy Consumption are significantly below the England average. The Council declared a climate emergency in 2019 and is working hard to reduce its carbon emissions to net-zero by 2030 and has signed up to an Environmental Charter and these will form the main plank of the Council's efforts.

Education and Learning

Although North Norfolk District Council is not directly responsible for the education of children we understand the importance of other aspects of quality of life that will impact on a child's ability to learn including a safe, warm, secure and stable home, in a clean and safe environment in a safe and welcoming community. Other key factors are encouragement and aspiration and being healthy and nourished. Early years and pre-school experiences will prepare a child for the more formal learning environment and play and positive parenting are essential as are recognising where parents need help and support.

We need to ensure that children and young people can see opportunity to reward their efforts in learning and obtaining qualifications through access to post 16 learning and vocational opportunities, apprenticeships and good quality jobs. We need to motivate our young people to remain in the area and contribute to creating a vibrant economy. It has already been identified that the lack of public transport is a barrier to accessing post 16 learning.

Where residents have not realised their learning potential at school they need to be able to access adult learning opportunities to realise that potential in later life.

Childcare quality is increasingly important where families are reliant on both parents working.

People and Community

The indicators relating to People and Community include Participation, Culture and Community Cohesion. Participation is the weakest area out of these for North Norfolk, but it is also worth focusing on the social fragmentation aspect of Community Cohesion which is linked to suicide rates which are higher than the Norfolk and England average.

Participation

We recognise the need to improve our engagement with our residents and customers – our Community Engagement Strategy which is currently being developed and our Customer Service Strategy and Customer Charter will be key planks of this work. We are also improving engagement with Town and Parish Councils through the Town and Parish Council Forum. We are particularly keen to work with schools and colleges to ensure that the voice of young people is heard and informs council decision-making through the establishment of a Youth Council. We believe that positive work across all of these fronts will result in a greater desire for residents to want to influence decisions over their local community which will result in increased voter turnout in both local and national elections.

It is hoped that increased participation in local decision making will also increase the desire of residents to become more involved in their local communities across a spectrum of activity resulting in more and varied organised activities and events including sports clubs and societies managed by member organisations through volunteers.

Transport and Connectivity

We are aware that many of our residents are reliant on personal transport to access services, take their children to school, travel to work, provide informal care to family

members and for socialisation. We accept that for many car ownership supports personal freedom.

We are also aware however that we need to encourage residents to reduce their reliance on cars, to reduce emissions and pollution, to reduce congestion in our towns and villages and to make our roads safer for pedestrians and cyclists. By doing this we can also encourage our residents to be more active. The costs of driving have increased significantly in recent times and continue to do so and so providing viable alternative options will help residents with managing the costs of daily life and generally increase their quality of life.

We do not have control over the provision of public transport in the area but can use our influence as a community leader to highlight the importance of regular bus and train services to our towns and villages. We can support the voluntary and community sector to provide more flexible and bespoke options for the more vulnerable members of our communities through our Community Transport Fund.

We can be more flexible in how we support our customers by facilitating and encouraging digital transactions where appropriate and explore opportunities to take services to our more vulnerable customers where this is not possible. Ultrafast Broadband connectivity will support this whilst improving access to a wide range of services and opportunities including the ability to work from home thus reducing the need to travel and car usage. Our Customer Service Strategy and Customer Charter will form a key plank of this work.

We will not be able to eliminate the use of vehicles and are therefore supporting the provision of electric vehicle charging points in key locations within our towns to reduce emissions and support our Environmental Charter.

A key measure in the index is minimum journey time to key services by car, public transport or walking and cycling – it is unlikely that we will be able to sufficiently influence these to improve our performance.

	North Norfolk	Norfolk
Minimum journey time (minutes) to 8 key services by car	17.9	12.9
Minimum journey time (minutes) to 8 key services by public transport or walking	34.1	25.4
Minimum journey time (minutes) to 8 key services by bicycle	35.3	23.8

GOV.UK. (n.d.). *Journey time statistics, England: 2019*. [online] Available at: <https://www.gov.uk/government/statistics/journey-time-statistics-england-2019>

Mental health and Isolation

There are particular concerns relating to isolation which are in some cases linked to rural isolation and connectivity but which can also be linked to social isolation particularly for older and disabled people and for marginalised and disadvantaged groups. For the majority these will have an impact on an individual's general wellbeing but for others will manifest in severe and enduring mental illness which will then impact on physical health and relationships.

There is particular concern about the incidence of suicide and the potential for dementia diagnosis and loneliness experienced by our ageing population. This is made worse by the lack of domiciliary care to support older people to live independently in their own homes and the lack of suitable supported housing solutions for older people.

Housing

We recognise the importance of good quality, secure and affordable housing on the health and wellbeing and quality of life of our residents. We are also aware of the devastating impact of homelessness and the marginalization of those who find themselves sleeping rough. We do not underestimate the size of the challenge when there is pressure on our housing stock to contribute to the delivery of a vibrant tourist economy and much needed jobs and limitations on delivering new housing due to the need to preserve our natural environment. For this reason Housing is one of our six themes in our Corporate Plan and we have a Housing Strategy and separate Homelessness and Rough Sleeper Strategy to focus our efforts.

Covid Recovery and Response

It is too early to say whether we can now move our focus from Covid response and outbreak management to Covid recovery. The early indications are that the pandemic has exacerbated health inequalities and we await data to be able to determine the full impact.

For many the pandemic changed the way we lived, learnt and worked and for some these changes might become the new norm as we adjust to a post pandemic world. It has impacted jobs, finance, education, families, caring responsibilities and social life and placed immense pressure on essential workers. Some groups have been affected more than others and moving forward we will need to focus more of our efforts towards those with the greatest needs.

Many people's mental health has been affected due to factors including furlough, job losses, loss of income, reduced social contact and family bereavement. There is now even more demand for what were previously stretched mental health services. Physical health has also been affected due to limited access to primary and secondary health care services including prevention and screening and a hesitancy of patients to access services for fear of contracting Covid. Although most people who contracted Covid did not suffer unduly, some have suffered lasting respiratory and organ damage and some have developed the long term debilitating Long Covid condition. There is now a significant backlog for most health services. It is fair to say that we will be managing the impacts of the pandemic for years to come.

The Health and Wellbeing Partnerships in Norfolk have each been allocated £347,500 to address some of the worst impacts of the pandemic and to assist with Covid recovery. Decisions on how this is utilised will be taken by the Partnership once established in April (in shadow).

Cost of Living

Just as we are planning for Covid Recovery we are also planning to mitigate the worst impacts of what has been described as a Cost of Living 'crisis'. Food banks have become an essential service within our communities for those who do not have sufficient money to pay bills including rent and utilities and are having to make difficult decisions between heating their homes and putting food on the table. The significant inflationary pressures on the cost of housing, food, energy and petrol will mean that many of our residents will be affected. This is likely to have a significant impact on the general wellbeing of many and for some will result in levels of anxiety and depression that will be harmful to both mental and physical health.

Levelling-Up

The Government has set out its ambition for addressing the geographical inequality in opportunity that is present across the country. It aims to give everybody the opportunity to flourish, enabling people to live longer, more fulfilling lives and benefit from sustained rises in living standards and well-being.

Much of the approach, set out in the Levelling-Up White Paper, complements this Quality of Life strategy with additional policy initiatives, to drive Levelling-Up across the United Kingdom, and further White Papers designed to tackle the drivers of disparities in health outcomes expected in the near future.

It is anticipated that Levelling-Up will result in potentially significant investment in areas where the geographical inequality is identified.

Ukrainian Refugee Resettlement

It is possible that our communities will continue to rally and respond to the plight of fleeing Ukrainians. As a result of this some local residents may reframe their lives such that their own worries will seem trivial in comparison. We need to play our part in this massive effort whilst still delivering services to local residents and meeting their needs and doing what we can to address the health inequalities we have identified. We have to be alert however to the community tensions that might at some point arise and recognise the need to provide support to both the Ukrainian refugees, our communities and individuals within our communities. Our Community Engagement Strategy and action plan and our Equality, Diversity and Inclusion Policy will be important to our success.

Working in Partnership

We are ideally placed to identify, and tackle the causes of inequality within our district. In doing so we can improve the quality of life of our residents. We already provide services to our residents through the delivery of both statutory and discretionary services, which have been designed to reflect their needs.

The issues that make up a person's quality of life are both varied and complex and whilst, we as a District Council, can address some of those through delivery of our services, other elements are firmly within the scope of other organisations, such as clinical provision through the NHS and Public Health through the County Council. Due to the complex factors it is often the case that issues cannot be addressed unless partners work together.

In order to be effective and to maximise the effectiveness of the relatively small financial resources available to the authority it is necessary for us to work collaboratively with a wide range of partners. Some of these partnerships and joint working arrangements are well established and the Covid pandemic has provided opportunities to both strengthen these existing arrangements and develop new ones.

The introduction of the Integrated Care system and the soon to be established Health and Wellbeing Partnerships on existing District Council boundaries provides us with a perfect opportunity to provide leadership at a Place level.

As well as the statutory organisations, there is a range of community and voluntary groups who provide services and support, either across our district, or on a more local community level. The community and voluntary sectors have similar constraints of limited resource and capacity but play a vital role in quality of life for those they work with. The impact that can be

made on quality of life inequalities will be greater if we add value to the work of others and they add value to the work we do.

Conclusions and Further Work

North Norfolk is an outstanding place to live, work, do business and visit. Many people choose to remain living in, move to or visit North Norfolk for the quality of life that it offers. The area is distinctive with large areas of outstanding natural beauty, long stretches of coastline and Broads which are a haven for wildlife and provide many and varied opportunities for leisure and recreation. There are many attractive villages and market towns with historical and cultural offerings. Yet these things which are valued as integral to quality of life can also bring challenges which can undermine their value for the more disadvantaged and marginalised within our communities.

Our Mission is to tackle these challenges head on to create a fair and welcoming inclusive North Norfolk where everyone can thrive, secure quality homes and good jobs whilst protecting and conserving our environment and delivering a sustainable future.

We know that improving quality of life for all will be challenging and that this will be difficult to measure. We have decided to develop this strategy around some immediate priorities and to review where we are after two years. During this time we will be putting in place robust mechanisms to engage with our communities at a grass roots level such that the next strategy will be informed by the priorities which are being communicated to us by our communities.

Actions for the Quality of Life Strategy

We have developed a number of actions to deliver against the Big Issues identified in the Strategy. A detailed action plan is included at appendix 6.

The action plan will be a living document and progress against our action plan will be monitored on a quarterly basis with a more formal annual review and report on progress. This will provide us to bring in more actions if circumstance and capacity allows. For this reason we have deliberately included the actions in a separate document rather than detailing them within the strategy document itself.

Appendix 1 - Centre for Thriving Places, Thriving Places Index



2021 scorecard –

North Norfolk



Appendix 2 - Centre for Thriving Places, Thriving Places Index

Headline element	Domain	Subdomain	2019	colour	2020	colour	2021	colour
Local conditions			4.99	Yellow	5.03	Yellow	4.53	Yellow
	Place and Environment		4.96	Yellow	4.41	Orange	4.60	Yellow
		Local environment	5.58	Light Green	5.16	Yellow	4.64	Yellow
		Transport	3.03	Red	1.72	Red	2.47	Red
		Safety	7.33	Green	7.06	Green	7.27	Green
		Housing	3.90	Orange	3.70	Orange	4.02	Orange
	Mental and Physical Health		5.93	Light Green	5.77	Light Green	5.04	Yellow
		Healthy and risky behaviours	6.32	Light Green	6.21	Light Green	5.65	Light Green
		Overall health status	5.35	Yellow	5.26	Yellow	5.26	Yellow
		Mortality and life expectancy	6.12	Light Green	5.83	Light Green	5.92	Light Green
		Mental health					3.31	Red
	Education and Learning		3.24	Red	3.87	Orange	3.68	Orange
		Adult education	2.60	Red	3.85	Orange	3.73	Orange
		Children's education	3.89	Orange	3.89	Orange	3.64	Orange
	Work and local economy		5.46	Yellow	6.12	Light Green	4.91	Yellow
		Unemployment	8.12	Green	8.27	Green	5.09	Yellow
		Employment	3.71	Orange				
		Basic needs	4.78	Yellow	4.88	Yellow	4.99	Yellow
		Local businesses	5.21	Yellow	5.21	Yellow	4.65	Yellow
	People and community		5.36	Yellow	4.96	Yellow	4.41	Orange
		Participation	5.08	Yellow	3.30	Red	2.24	Red
		Culture	5.11	Yellow	5.02	Yellow	5.02	Yellow
		Community cohesion	5.88	Light Green	6.57	Green	5.98	Light Green
Sustainability			5.17	Yellow	4.77	Yellow	4.43	Orange
	Energy use				3.20	Red	2.63	Red
	Waste				4.79	Yellow	4.76	Yellow
	Green infrastructure				6.32	Light Green	5.89	Light Green
Equality			6.57	Green	6.82	Green	7.23	Green
	Health							
	Income		7.14	Green	8.16	Green	8.89	Green
	Gender		5.99	Light Green	5.48	Yellow	5.57	Light Green

NB: Income indicator is 80/20 percentile weekly earnings difference

Appendix 3 - Co-op Community Wellbeing Index

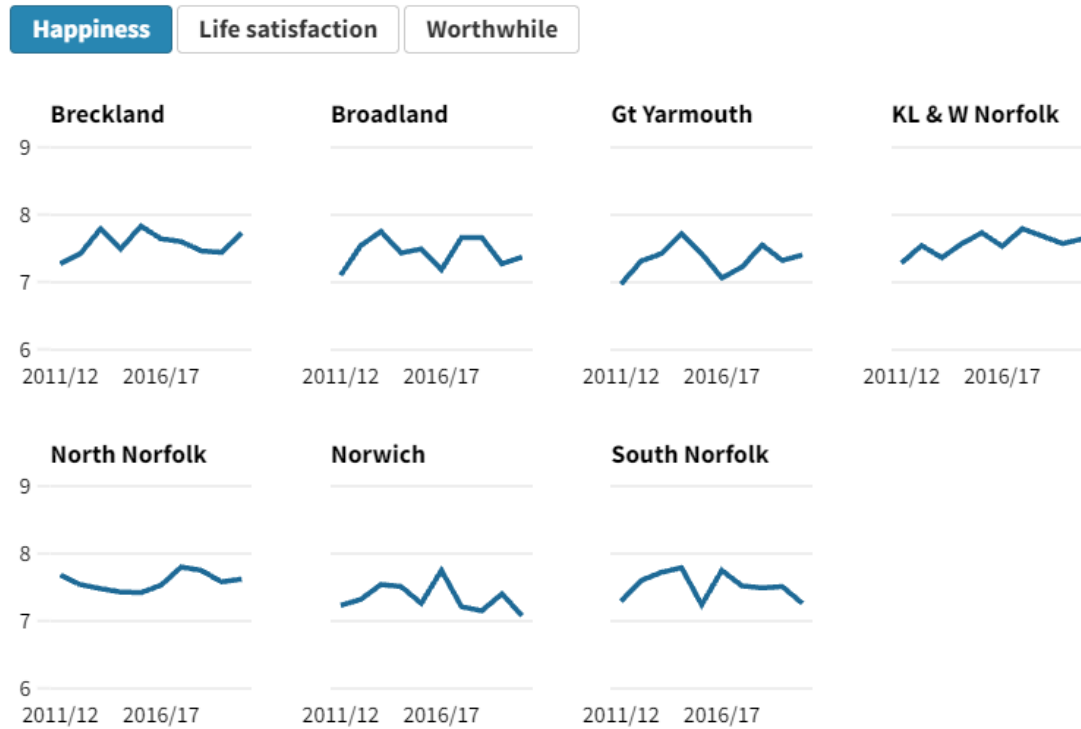
People	Health	Access to health services Hypertension and heart failure Drugs used in diabetes Anti-depressants Obesity Dementia
	Education and learning	Access to schools Access to good schools Access to adult education Access to libraries School quality
	Economy, work and employment	Proximity of work to home Hours worked Household income Vacant commercial units Free school meals Unemployment Distance to nearest shop Distance to nearest Post Office Presence of Co-op/SE/CO per 10,000 population
Place	Culture, leisure and heritage	Places of worship Types of workers Access for leisure Museums, art galleries, music halls and theatres Listed Buildings
	Housing, space and environment	Affordability Overcrowding Green space Public spaces Air quality Pollution
	Transport, mobility and connectivity	Communication, internet Public transport
Relationships	Relationships and trust	Social spaces Presence of young children One person household aged 50+ Proximity of work to home Household churn Long-term health status Crime in the locale Crime in the town centre Neighbourhood watch scheme
	Equality	House price gap Second home ownership Independent schools Qualifications Ethnic equality Relative affluence Long-term security
	Voice and participation	Voter turnout Co-op member engagement Signing of petitions

[cwi-technical-report.pdf \(coop.co.uk\)](http://cwi-technical-report.pdf(coop.co.uk))

Appendix 4 – ONS4 Annual Residents Survey results as reported in the EDP 23 March 2022

Well-being in Norfolk in the last 10 years

2011/12 to 2020/21



Source: [ONS - Annual Population Survey](#).

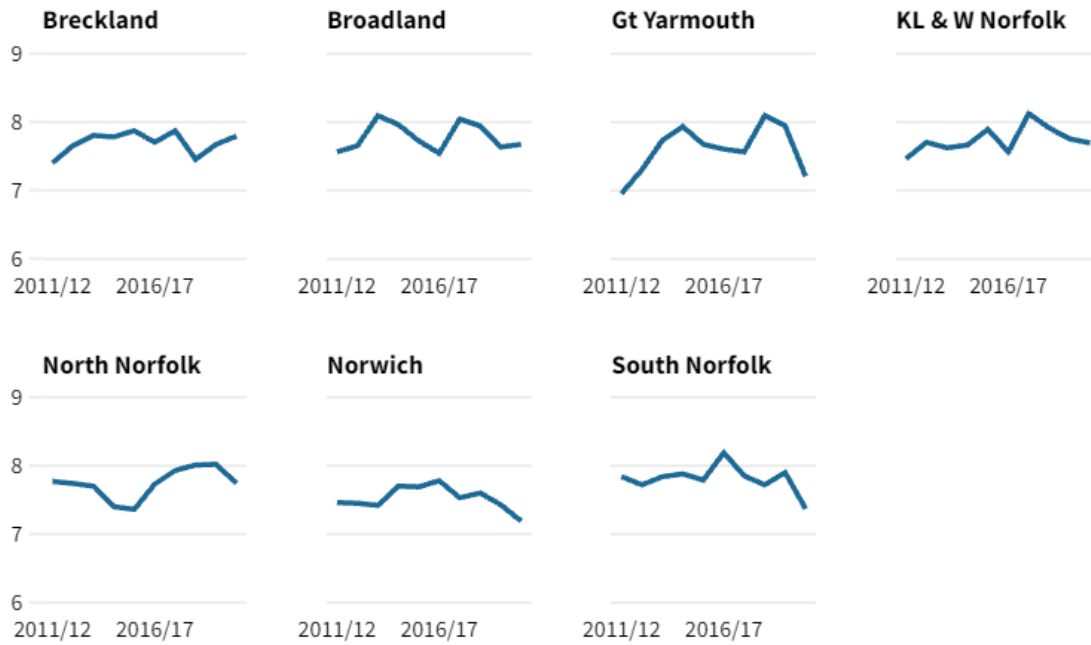
Well-being in Norfolk in the last 10 years

2011/12 to 2020/21

Happiness

Life satisfaction

Worthwhile

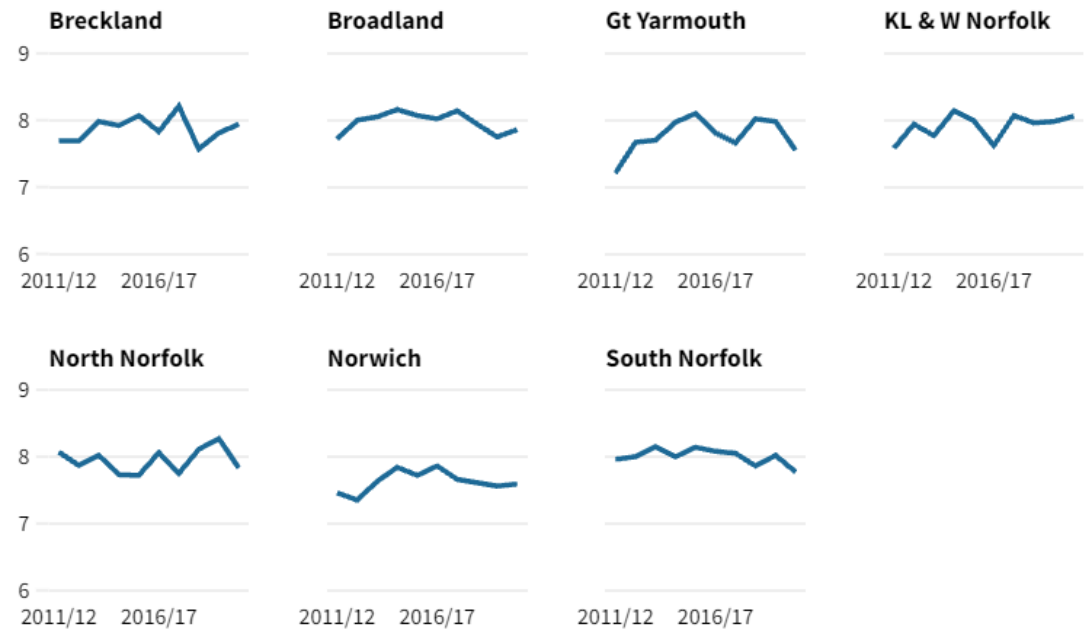


Source: [ONS - Annual Population Survey](#)

Well-being in Norfolk in the last 10 years

2011/12 to 2020/21

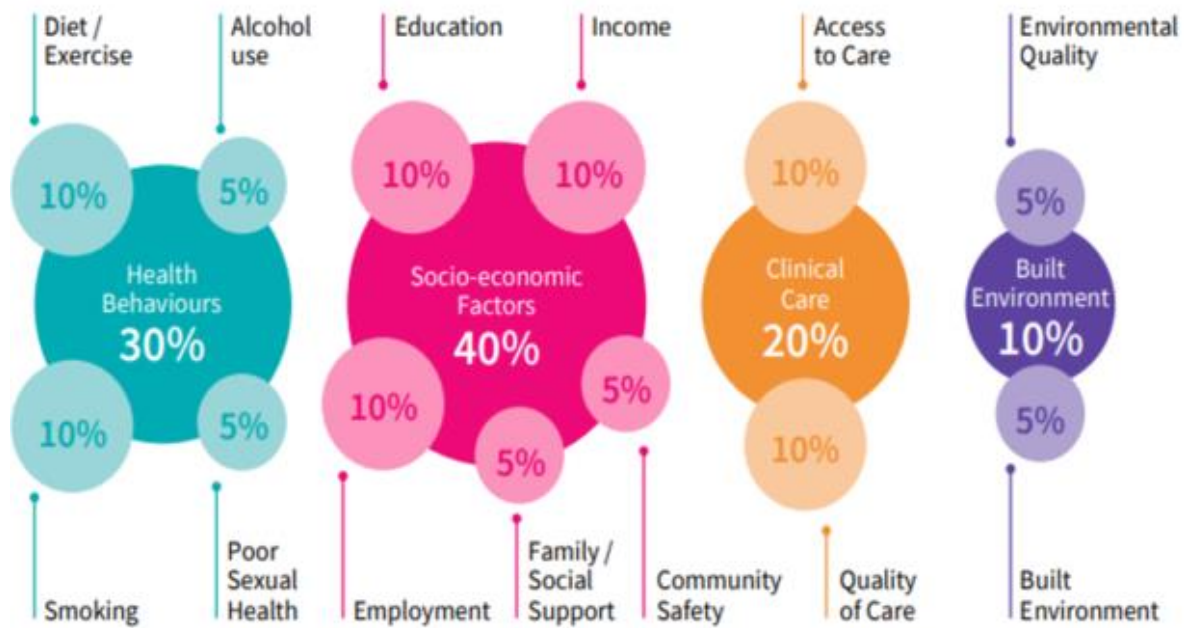
Happiness Life satisfaction **Worthwhile**



Source: [ONS - Annual Population Survey](#)

Appendix 5 - Wider Determinants of Health

Castle Point & Rochford Health and Wellbeing Strategy 2022 - 2025



Source: Robert Wood Johnson Foundation and University of Wisconsin Population Health Institute in US to rank countries by health status.

**Appendix 6 – Update on objectives contained within North Norfolk District Council
Corporate Plan 2019 - 2024**

6 pages currently

Appendix 7 – Quality of Life Strategy 2022 – 2024 Action Plan

8 pages currently

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Appendix 7 Quality of Life Action Plan

Big issue	Action	Reasoning	Responsibility	Resources	Timescale	Outcomes/measures
Sustainability /Housing/ Transport and Connectivity	Implement the new Local Plan	to protect and enhance the natural and built environment and promote sustainability	Place and Climate Change Directorate	officer time	ongoing	monitoring of the effectiveness of the Local Plan Policies
Sustainability	Deliver our Net Zero 2030 Strategy and Climate Action Plan (NEW)	to support our Climate Emergency declaration and Net Zero Target	Climate and Environment supported by all Directorates	officer time, revenue and capital funding for investment in alternatives to use of fossil fuels/renewables	ongoing	monitoring of actions taken and their impacts, reduction in carbon footprint
Sustainability Page 47	Implement and monitor the effectiveness of the Council's Environmental Charter	to support our Climate Emergency declaration and Net Zero Target	Climate and Environment supported by all Directorates	officer time, revenue and capital funding for investment in alternatives to use of fossil fuels/renewables	ongoing	monitoring of actions taken and their impacts, reduction in carbon footprint
Sustainability	Continue to manage our green spaces to retain the Green Flag status	to protect and maintain our natural assets and promote access to and enjoyment of these for residents and visitors	Environmental and Leisure Services	officer time, revenue and capital funding to maintain and enhance the asset	ongoing	monitor visitor numbers and seek feedback from users on the impact of their visit on their health and wellbeing
Sustainability	Monitor the air quality in the district via the Air Quality Annual Status Report (ASR) (NEW)	to identify any decrease in the air quality levels which would give cause for concern and enable action to be taken to reduce levels of pollution	Environmental Protection	officer time	annually	effective action to reduce air pollution if levels increased to a level which gave cause for concern

Big issue	Action	Reasoning	Responsibility	Resources	Timescale	Outcomes/measures
Education and Learning	Review and update the Council's Play Strategy (NEW)	to ensure that there is adequate, appropriate and accessible opportunities for play for children and to encourage outdoor active play in our natural environment	Environmental and Leisure Services	officer time, revenue and capital funding for developing and maintaining play provision and exploring opportunities to lever in funding via voluntary, charitable and community groups	April 2023	completion of review and updated Play Strategy produced
People and Community - Participation	Develop and implement a Community Engagement Strategy	to provide a framework for engaging with our residents, communities and key stakeholders to increase the influence they have over decisions that affect them	Communities Directorate	mainly officer time with some resources being needed to facilitate engagement activities	June 2022 and ongoing	a published Community Engagement Strategy/ demonstration of consideration of the most appropriate engagement mechanism for the circumstance/ promotion of engagement opportunities on the Council's website and how the engagement has affected the decision being made
People and Community - Participation	Engagement with the residents of North Norfolk and communities of interest to determine future priorities for Quality of Life (NEW)	to understand the issues faced by our residents and communities of interest and in particular those who are the most disadvantaged and marginalised	Communities Directorate	mainly officer time with some resources being needed to facilitate engagement activities	April 2023	evidence of appropriate engagement which can adequately inform the development of priorities for the refresh of this Strategy

Big issue	Action	Reasoning	Responsibility	Resources	Timescale	Outcomes/asures
People and Community - Participation	Develop and implement an Equality, Diversity and Inclusion Strategy (NEW)	to ensure that Equality, Diversity and Inclusion are embedded in the decisions made by the Council and in service delivery	People Services	officer time	April 2023	the production of an Equality, Diversity and Inclusion Strategy, development of a consistent process for undertaking Impact Assessments as part of decision making processes, a suite of outcome measures, delivery of training for all staff and members
People and Community - Participation Page 49	Continue to support and develop the North Norfolk Domestic Abuse Forum (NEW)	to provide support to survivor victims of domestic abuse (DA) and an engagement opportunity for victims to influence service provision to bring together partner agencies to improve service provision	the Forum was brought together by Members of the district Council	officer support from Democratic Services and People Services	ongoing	development of the forum, feedback from members, recognition that services for those at risk of DA and victim survivors is improving and tolerance of DA and violence against women and girls is reducing
People and Community - Participation	Continue to support communities to deliver activities, services and events which increase participation and active engagement with visual, literary and performing arts through the Arts and Culture Fund	improve health and wellbeing through participation and active engagement in cultural activity	Early Help and Prevention	officer and member time, Arts and Culture Fund	ongoing	fulfilment of the terms and conditions of the grant - demonstration of significant benefit to the health and wellbeing of North Norfolk residents and an active participatory role

Big issue	Action	Reasoning	Responsibility	Resources	Timescale	Outcomes/asures
People and Community - Participation	North Walsham Heritage Action Zone	to create and deliver community-led cultural activities on North Walsham High Street	Economic and Community Development	officer time, North Walsham Cultural Consortium, Historic England	ongoing to 2024	delivery of local events celebrating local pride in the town, theatre and musical performances and art work created by local people
People and Community - Participation	continue to invest in the Cromer Pier	to maintain and enhance Cromer pier as a cultural icon, enabling it to thrive as part of the cultural offering	Estates and Assets, Assets and Property	officer time, significant revenue and capital funding	ongoing	monitoring of visitors to the Pier and the Pavilion Theatre
Transport and Connectivity	Continue to fund projects that benefit vulnerable, disadvantaged and isolated people of all ages living in rural areas to access the services and facilities through the Community Transport Fund	fund transport solutions to facilitate access to services and facilities for vulnerable, disadvantaged and isolated people of all ages living in rural areas	Early Help and Prevention	officer and member time, Community Transport Fund	ongoing	grant terms and conditions fulfilled, benefit to vulnerable, disadvantaged and isolated people of all ages living in rural areas in accessing services and facilities
Transport and Connectivity	consider ways in which the Council and partners can support and encourage active travel (NEW)	to reduce use of personal transport and support and encourage active lives	Leisure Services, Active Norfolk	officer time, revenue funding to jointly fund work of Active Norfolk	April 2022	monitoring and delivery against service level agreement, increase in activity levels of children and adults
Mental Health and Isolation	Explore opportunities to make our green spaces more accessible for vulnerable households and to support positive parenting through interaction with nature (NEW)	increase accessibility and utility of our natural assets to improve the health and wellbeing of marginalised groups and to ensure the best start in life for children	Environmental and Leisure Services, People Services	officer time, revenue and possibly capital funding to facilitate transport to and from, consider bidding opportunities by voluntary, charitable and community groups	September 2022	development of options/funding bids/business case

Big issue	Action	Reasoning	Responsibility	Resources	Timescale	Outcomes/asures
Housing	Delivery of the Housing Strategy Action plan	the action plan has four themes; increase the supply of housing, improve the condition of the private sector housing stock, make best use of empty homes and support vulnerable residents to access and sustain suitable housing all of which contribute to the quality of life for residents within our communities	Resources Directorate, Place and Climate Change Directorate, Communities Directorate	officer time, significant capital and revenue resource, partner resource including other statutory services, Registered Providers, Government funding, community resource and funding	ongoing to 2025	increased supply of housing (market and affordable), improvement in private sector stock condition (stock condition survey), empty homes brought back into use (Council Tax returns), development of Housing with Care, DFG expenditure, delivery of energy advice and take up of energy efficiency measures/grants
Housing	Review and update the Homelessness and Rough Sleeper Strategy and action plan (NEW)	to review the effectiveness of current responses in respect of homelessness and rough sleeping and to deliver a step change in upstream prevention activity	Housing Options	officer time, Homelessness Prevention Grant and RSI Funding, potential opportunities Rough Sleeping Accommodation Programme	in progress – completion of the review by July 2022 and ongoing	updated strategy/action plan demonstrating homelessness prevention and improved standards of temporary accommodation
Housing	Work towards Domestic Abuse Housing Alliance (DAHA) accreditation for the Housing Service (NEW)	to increase the knowledge and understanding of staff within the Housing Service with regards to domestic abuse so that they can better support those approaching the Council for support and assistance	Housing Options	officer time, funding from Norfolk County Council (as part of the joint responsibility for the Norfolk Support in Safe Accommodation Strategy) to fund the membership of DAHA and the accreditation process	commencing in April 2022 with accreditation by March 2025 at the latest	actions being undertaken as part of the DAHA accreditation process with successful accreditation, positive customer feedback from those coming to the Council for support and assistance

Big issue	Action	Reasoning	Responsibility	Resources	Timescale	Outcomes/asures
Covid Response and Recovery	To continue to manage risks related to Covid, including preparedness for outbreak management, supporting communities to move towards Covid recovery and developing resilience	to continue to work with partners to protect our communities	Communities Directorate, Resilience Team	officer time, revenue resource, Government support and support of partners	ongoing	monitoring of community transmission and activity in response and recovery
Cost of Living	Support residents to mitigate the worst impacts of the current cost of living 'crisis' (NEW)	helping residents to mitigate the worst of the cost of living 'crisis' through implementation of Gov't sponsored schemes, delivery of its own services, use of funding available and working in partnership with statutory, voluntary and community orgs	People Services, Revenue Services, Customer Services	officer time, administration of Gov't schemes, development of discretionary schemes using funding from Gov't passed down from other agencies, using Council resources working in tandem with partners and communities	April 2022 on going depending on funding	successful administration of Government schemes and allocation of funding, development of discretionary schemes with output and where possible outcome measures, co-ordinated working with partners and communities
Levelling-Up	Undertake an audit of services on a locality basis to identify gaps in order to inform future decisions on service delivery and commissioning (NEW)	to ensure that the necessary services are available/accessible to residents and where they are not or where demand exceeds capacity to highlight to commissioners, support community/voluntary sector to support individuals and groups as an alternative to statutory provision	People Services	officer time	April 2022 ongoing	development of repository of information at a locality level which can be updated as service provision in an area changes due to services closing or new services being delivered and monitor demand for services against capacity

Big issue	Action	Reasoning	Responsibility	Resources	Timescale	Outcomes/asures
Levelling-Up	Engage with partners and Government to ensure that the needs of North Norfolk are recognised in the Levelling-Up considerations	support the development of our communities, promoting a vibrant and sustainable economy and reducing health inequalities	Corporate Leadership Team	officer time, potential match funding for projects, resources of partners	ongoing	demonstration of investment in North Norfolk relative to other Districts
Ukrainian Refugee Resettlement	Support the Ukrainian refugee resettlement arrangements (NEW)	to support the Homes for Ukraine process to ensure that refugees are able to come to North Norfolk, provide support to refugees and their sponsors to facilitate integration in to the area and effectively manage any community tensions	Communities Directorate, Economic and Community Development, Revenues	officer time, funding from Government to support placements and integration, administration of support payments to sponsors	March 2022 ongoing to 2025	monitoring numbers of refugees coming to North Norfolk/accommodation and welfare check requests, successful placements and support provided, monitoring of placements and breakdown, monitoring of impact on Council services
Working in Partnership	Set up the North Norfolk Health and Wellbeing Partnership (NEW)	Health and Wellbeing Partnerships are being set up on district council boundaries as part of the new Norfolk and Waveney Integrated Care System	District Portfolio Holder as Chair supported by Communities Directorate and Norfolk County Council Public Health	District Council Member and officer time, Advanced Public Health Officer, venues for meetings, Covid Recovery Funding, resource of the partners	inaugural shadow meeting April 2022 ongoing	a functioning Health and Wellbeing Partnership resulting in improved health outcomes

Big issue	Action	Reasoning	Responsibility	Resources	Timescale	Outcomes/asures
Working in Partnership	Develop and implement a Health and Wellbeing Strategy	to prioritise the action and resources of the Council with regard to Health and Wellbeing and to influence the work of the Health and Wellbeing Partnership and actions and spend of partners	Communities Directorate	mainly officer time and resources currently being spent on Health and Wellbeing activity, with influence over the spend of other partners and the Covid Recovery Funding	July 2022 and ongoing	a published Health and Wellbeing Strategy, directing of resources, identified priorities, evidence of influencing spend of partners/spend for Covid Recovery, improvement in key health and wellbeing outcome measures in the longer term
Working in Partnership Page 54	Work in partnership with Active Norfolk to increase activity and participation in organised sport (NEW)	to deliver the shared priorities of the Council and Norfolk County Council to increase activity and participation in organised sport to improve health and wellbeing	Leisure Services	officer time, revenue funding to fund joint post	from April 2022	monitor effectiveness of Active Norfolk against agreed criteria
Working in Partnership	Continue to support the work of the Norfolk Community Safety Partnership	to help to keep our residents safe, engendering trust in statutory services and reducing the fear of crime and harm at both an individual and community level	Communities Directorate, partners supporting the work of the Community Safety Partnership	mainly officer time, some budget allocation to support the delivery of local and countywide initiatives	ongoing	attendance at partnership meetings and contribution to local and countywide initiatives, low crime rates and evidence that fear of crime and harm is not increasing

Appendix 6

Quality of Life Theme Objectives – Corporate Plan

Objective	Action	Progress
<p>Undertaking a Quality of Life Survey to inform the development and implementation of a Quality of Life Strategy so as to improve the health and mental wellbeing of communities and individuals across North Norfolk</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 55</p>	<p>Undertake a Quality of Life Survey amongst local residents in order to understand the issues people face and to identify ways in which the Council (and its partners) can help those, in all communities, to access the things that they need. Working with appropriate partners, the survey will use existing evidence but also seek to fill gaps in data. It will need to take account of and inform many of the other activities in this delivery plan, such as:</p> <ul style="list-style-type: none"> • access to services • housing • environmental quality • potential influences of climate change 	<p>Delayed</p> <p>Delivery of this objective in the way originally intended (through extensive community engagement) has been significantly compromised due to COVID as it hasn't been possible to undertake face to face surveys and many aspects of normal life have been suspended through lockdowns, phased lifting of social distancing restrictions etc.</p> <p>Priority has been given to developing a Quality of Life strategy based on known local data sets and indicators, with engagement mechanisms to be developed in the medium term such that work on the strategy isn't delayed further.</p>
<p>Developing and implementing a Quality of Life Strategy (to improve health and mental wellbeing of communities and individuals)</p>	<p>Develop a Quality of Life Strategy to ensure services, provided by the Council (and its partners) that impact on local quality of life, respond to issues raised by those in our local communities. The Strategy should be inclusive of all groups within society but also address any specific needs identified in the Quality of Life Survey. It will include:</p> <ul style="list-style-type: none"> • influences on physical and mental wellbeing across all age groups • access to healthy, active lifestyles • access to the arts and the celebration of local culture • engagement in local community activities • isolation 	<p>Completed - Quality of Life Strategy 2022 – 2024 (developed March 2022)</p> <p>Notwithstanding the challenges of the COVID pandemic – particularly in limiting participation in many voluntary and community organisations, the strength of community organisations and social networks across North Norfolk has underpinned much of the District's response to the COVID situation. Early in the pandemic many local neighbourhood support groups were established or developed out of town and parish councils and similar bodies to work alongside the District Council in co-ordinating support to vulnerable members of the community who were shielding or self-</p>

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 56</p>	<ul style="list-style-type: none"> • innovative ways of treating health conditions, e.g. social prescribing • access for all to services and facilities <p>Work with local communities and partner organisations to implement the Quality of Life Strategy and enable activities that assist in its delivery.</p> <ul style="list-style-type: none"> • communicate the strategy to those involved in its delivery or are affected by it • raise awareness and encourage interest in the development of actions that achieve the objectives in the strategy • ensure that the strategy is embedded in all relevant services, activities, projects and decisions undertaken by the Council • monitor the implementation & effectiveness of the strategy 	<p>isolating in accordance with Government guidance. Despite the COVID pandemic, the District Council has continued to support local community organisations deliver quality of life outcomes through key community and voluntary sector activity through the North Norfolk Sustainable Communities Fund, Community Transport Grants and Arts Grants mechanisms</p>
<p>Sports Strategy</p>		<p>Completed Sports and Physical Activity Development Strategy 2018-2023</p>
<p>Continued investment in Cromer Pier as an iconic heritage and cultural attraction</p>	<p>Maintain and enhance the physical structure of Cromer Pier, its historic Pavilion Theatre and continue to work with partners to develop a programme of shows, events and appropriate activities that attract a wide audience, in order to celebrate the unique qualities that make this heritage asset an icon of the District that benefits residents, businesses and the wider local economy</p>	<p>Ongoing Annual programme maintenance / 5yr contract Programme of refurbishment has continued despite COVID with minimal delays / slippage Ongoing discussions with operator of the Pier to understand impact of COVID on audiences, projected income / turnover and to agree a joint Recovery Plan as necessary Investment programme in pier continuing as programmed Recovery Plan for pier operations to be agreed based on 2020 and 2021 audience / visitor numbers</p>
<p>Public conveniences investment (Changing Places Facility in each of the 7 principal settlements)</p>	<p>Maintain the quality and accessibility of public conveniences, ensuring they are suitable to the needs of the community and visitors to the area</p>	<p>Ongoing Changing Place facilities provided in Cromer and Sheringham (The Reef).</p>

		<p>£300k successful bid submitted to Government Changing Places programme (September 2021) for North Walsham, Sheringham and Stalham.</p> <p>Ongoing investment in proposals and facilities which improve inclusion and accessibility of North Norfolk; with contracts let for new public toilets including Changing Place facilities at Queens Road, Fakenham and Stearmans Yard, Wells-next-the-Sea for delivery by March 2022</p>
<p>Developing and implementing an Accessibility Guide for the District</p> <p>Page 57</p>	<p>Formulate and publish a guide (in appropriate, traditional and novel formats) to help communities:</p> <ul style="list-style-type: none"> • promote engagement • tackle isolation • improve accessibility to all (e.g. beach wheelchairs, community transport initiatives) • address the needs of people with conditions that impact upon their quality of life (e.g. dementia) 	<p>North Norfolk Accessibility Guide published April 2021 https://mediafiles.thedms.co.uk/Publication/EE-NN/cms/pdf/north_norfolk_accessibility_guide-2021.pdf</p> <p>Successful delivery of beach wheelchairs at Cromer and Sheringham during summer 2021 with huge volume of positive social media coverage achieved; with proposals now being developed to extend provision to Mundesley and Sea Palling in 2022.</p> <p>The Accessibility Guide is to be developed further as part of our engagement with local communities of interest</p>
<p>Health and Wellbeing Strategy</p>		<p>Delayed</p> <p>to be delivered as an action of Quality of Life Strategy – possibly a partnership strategy of the North Norfolk Health and Wellbeing Partnership</p>
<p>Maximising the level of external funding through working with partners to support community projects within the District</p>	<p>Identify new opportunities for funding to implement and promote the Quality of Life Strategy and achieve its outcomes. Seek opportunities to work with partners and local communities in developing projects and facilities that address the findings of the Quality of Life survey</p>	<p>Ongoing</p> <p>Development of revised proposal to provide a 3G multi-use pitch at North Walsham Football Club site pending Submission of bids to the Community Renewal Fund programme announced by the Government in March 2021 for proposals at Fakenham and North – not successful</p>

		Submission of bid to Government Changing Places programme in September 2021 - £300k allocated
<p>Support and nurture the development of strong, sustainable and healthy local communities</p> <p>Page 58</p>	<p>Review existing funding initiatives and investigate new schemes that assist local communities in addressing their needs and improving community wellbeing, via grants and community development support. Provide support and advice to local community organisations to help them access external funding opportunities and develop initiatives that address local needs and support community sustainability. Facilitate community initiatives, in accordance with the Quality of Life Strategy, that aim to improve the physical and mental wellbeing of local residents</p>	<p>Ongoing</p> <p>Notwithstanding the challenges of the COVID pandemic – particularly in limiting participation in many voluntary and community organisations, the strength of community organisations and social networks across North Norfolk has underpinned much of the District’s response to the COVID situation. Early in the pandemic many local neighbourhood support groups were established or developed out of town and parish councils and similar bodies to work alongside the District Council in co-ordinating support to vulnerable members of the community who were shielding or self-isolating in accordance with Government guidance. Despite the COVID pandemic, the District Council has continued to support local community organisations deliver quality of life outcomes through key community and voluntary sector activity through the North Norfolk Sustainable Communities Fund, Community Transport Grants and Arts Grants mechanisms</p>
<p>Continued commitment to maintain Blue Flag and Green Flag status for the Council’s beaches and open spaces</p>	<p>Continue to maintain and, where appropriate, improve the quality and accessibility of our public open spaces and beaches. Promote their use for a wide variety of events and activities that meet the health and wellbeing needs of the local community and attract visitors to the area Develop a programme of sustained improvement and investigate innovative investment opportunities in order to ensure that our open spaces and beaches are attractive and available for all to enjoy and, where appropriate, meet the criteria for Green and Blue Flag awards</p>	<p>Ongoing</p> <p>Retained 6 Blue Flag beaches</p> <p>Introduction of beach wheelchairs at Cromer and Sheringham – very successful with plans now being developed to provide in Mundesley and Sea Palling as well as Cromer and Sheringham in 2022.</p> <p>Retained 3 Green Flag Open Spaces</p> <p>Continued investment in facilities and offer at Holt Country Park – new play area</p>

<p>Delivery of new leisure centre at Sheringham</p>	<p>Develop the new leisure centre to replace the Splash, in order to maintain a high quality, inclusive and accessible facility. Working with our leisure contractor and other partners to:</p> <ul style="list-style-type: none"> • encourage people to lead and maintain active and healthy lifestyles • provide a range of modern and innovative fitness equipment accessible to all • encourage the development of physical activity programmes oriented to the needs of all sections of the local community • introduce even the youngest residents to fun and beneficial leisure activities • provide opportunities to address specific health conditions (e.g. via social prescribing) 	<p>Completed The Reef completed and open to the public 1 November 2021. Some delays experienced in project timescales due to COVID lockdown and material supply issues.</p>
<p>North Walsham Heritage Action Zone</p>	<p>Under the Heritage Action Zone programme, engage the local community in the development and delivery of projects and activities that celebrate the cultural and historic significance of North Walsham Town Centre, with the aim of enhancing the economic and cultural vitality of the town, including:</p> <ul style="list-style-type: none"> • cultural programming activities • improving historic assets • supporting local community organisations • supporting cultural events 	<p>Ongoing – Delivery Plan adopted by April 2020 Strong community engagement programme with the public and town centre businesses through HAZ Project Officer and appointed consultants Cultural programme developed alongside historic interpretation to inform environmental enhancement programme. Proposals for North Walsham town centre / Market Place enhancement programme consulted upon in Spring 2021 with detailed proposals now subject to final consultation with programme of town centre traffic management and environmental enhancement works to be carried out in period January 2022 – March 2023 Programme of cultural events being prepared for delivery from 2022</p>
<p>Delivery of the Mammoth Marathon</p>	<p>Organise and promote a running event as a way of marketing the District and raise awareness of the benefits of physical activity. Use this and other events</p>	<p>Rescheduled 2020 and 2021 proposed dates cancelled / postponed due to COVID, now to be staged in 2022</p>

as a platform to showcase initiatives that aim to support health and wellbeing, environmental awareness, arts and culture and other quality of life issues. After the first 'mammoth' marathon and half marathon events, review its effectiveness

