

 the low tax borough	London Borough of Hammersmith & Fulham HOUSING HEALTH & ADULT SOCIAL CARE SELECT COMMITTEE 13 November 2013
TITLE OF REPORT: Draft Health & Well-being Strategy	
Report of the Corporate Director	
Open Report	
Classification - For Scrutiny Review & Comment	
Key Decision: No	
Wards Affected: All	
Accountable Executive Director: Liz Bruce, Tri-borough Executive Director	
Report Author: David Evans	Contact Details: Tel: 020 8753 2154 E-mail: david.evans@lbhf.gov.uk

1. EXECUTIVE SUMMARY

- 1.1. As one of the provisions of the Health & Social Care Act 2012, the Council established the Health & Well-being Board in June 2013. One of the duties of the Board is to produce a Joint Health & Well-being Strategy between the Council and H&F CCG.
- 1.2. This report provides the opportunity for the Housing, Health and Adult Social Care Select Committee to comment on the draft strategy (Appendix 1) before it is agreed at the next meeting of the Health & Well-being Board on 13 January 2014.

2. RECOMMENDATIONS

- 2.1. The Housing, Health & Adult Social Care Select Committee is asked to comment on the Draft Joint Health & Well-being Strategy as set out in Appendix 1.

3. INTRODUCTION AND BACKGROUND

- 3.1 The Act sets out the primary aim of health and wellbeing boards to promote integration and partnership working between the NHS, social care, public health and other local services and improve local democratic accountability. This is to be achieved through three main functions:

- To assess the needs of the local population and lead the statutory joint strategic needs assessment
- To promote integration and partnership across areas, including through promoting joined up commissioning plans across the NHS, social care and public health
- To support joint commissioning and pooled budgets arrangements where all parties agree this makes sense.

3.2 The Terms of Reference for the Board were agreed by Council in June 2013 and membership was agreed to be the minimum required in the 2012 Act, however the Board does not have the power to appoint additional persons to the Board as it develops. Current membership is set as:

- Cabinet Member for Community Care (Chair)
- Chair of the CCG (Vice –chair)
- Cabinet Member for Children’s Services
- Tri-borough Director for Children’s Services
- Tri-borough Director for Adult Social Care
- Director of Public Health
- A Local Healthwatch Representative

4. Joint Health & Well-being Strategy

4.1 The Board is required by statute to have a Joint Health & Well-being Strategy, the draft strategy is attached as Appendix 1 and the Housing Health & Adult Social Care Select Committee is asked to comment prior to it being agreed at the Health & Well-being Board in January 2014.

4.2 The Strategy is based on the key issues identified through the Joint Strategic Needs Assessment and highlights the key areas where the Council and CCG aims to work collaboratively. The Boards priorities are set out as follows:

1. To develop integrated health and social care services which support prevention, early intervention and reduce hospital admissions.
2. To deliver the White City Collaborative Care Centre to improve care for residents and regenerate the White City Estate.
3. Every child has the best start to life
4. Tackling childhood obesity
5. Supporting young people into a Healthy Adulthood
6. To develop better access for vulnerable people to Sheltered Housing.
7. To develop a strategy for improving mental health services for service users and carers to promote independence and develop effective preventative services.
8. Develop a shared strategy for sexual health across Triborough with a focus on those communities most at risk of poor sexual health.

4.3 The strategy covers the period 2013-2015 as it is expected that it will require regular review to ensure that it remains relevant in a rapidly changing health, social care and public health environment.

- 4.4 The Strategy is out to consultation until 20 December after which it will be finalised and presented for agreement to the Health & Well-being Board.

LOCAL GOVERNMENT ACT 2000
LIST OF BACKGROUND PAPERS USED IN PREPARING THIS REPORT

No.	Description of Background Papers	Name/Ext holder file/copy	of of	Department/ Location
1.	Joint Health & Well-being Strategy; Consultation Draft	David Evans		Tri-borough Adult Social Care. 77 Glenthorne Road

**Hammersmith and Fulham
Health and Wellbeing Strategy**

2013-2015

Consultation Draft

Contents

Forward

1. The Need for Change
2. The Vision
3. Priorities
4. Role of the Board
5. The Strategy
6. Delivering Outcomes
7. Our Approach
8. Measuring Success
9. Next Steps

Forward

Cllr Marcus Ginn

Cabinet Member for Community Care

Chairman of the Hammersmith & Fulham Health & Well-being Board

1. The Need for Change

Hammersmith & Fulham faces major challenges over the next decade, including significant health inequalities and increasing pressure upon financial resources. We need to work with local communities to make sure that they have services which support them to be independent and to make sure that, whatever their conditions, they can live a full and active life and receive services in their own homes or as close to where they live as possible.

The scale of the challenge is illustrated by the significant variation in life expectancy between the most and least deprived areas in the Borough. This difference in life expectancy is a 7.9 year gap for men and a 5.4 year gap for women. This gap has widened over the last five years and increases in life expectancy have been driven primarily by improvements in the more affluent areas, with life expectancy in the more deprived areas remaining almost the same.

Looking to the future there are a number of areas where health needs will change and increase.

- A rise in the number of older people over the next two decades combined with a relatively low number of unpaid carers is expected to have a dramatic impact on demand for services.
- Illnesses such as dementia, more prevalent among older populations, will become increasingly common. Currently, there are likely to be around 1,250 patients in Hammersmith and Fulham with dementia and by 2025, this is likely to be in the region of 1,500 patients. Other public health concerns for the older population, such as social isolation, may become more common as may physical and sensory disability and reduced mobility.
- Unless behaviour and services change, people may experience longer periods of time living with disability, resulting from improved survival rates from major diseases such as stroke, heart disease and cancer.
- Changes in the environment, behaviour and social norms mean it is very likely we will see an increase in obesity and diseases associated with it, as well as an increase in alcohol related harm.
- Medical and social care advances have been leading to significant increases in the life expectancy of children with complex needs. This vulnerable population group may therefore need support over longer periods.

The reforms to promote integration and partnership working at the local level are tools to help us tackle some of these challenges and build on the strong history in H&F of joint working between the NHS and other key partners in the borough.

Building on this legacy, the new Health and Wellbeing Board (HWB) brings together the Council and NHS with the aim of achieving integrated services across the health and social care sector in order to improve the health and wellbeing of our local population.

Public health has also changed, with the Council taking on new responsibilities for public health services.

2. The Vision: Stronger Communities, Healthier Lives

Our vision for health and well-being in the borough is:

- To enable local people to live longer, healthier and more prosperous lives.
- To enable our residents and communities to make a difference for themselves
- To ensure our residents have good access to the best services, advice and information
- To provide our residents with choice and services which meet their local needs
- To keep our community a safe, cohesive and vibrant place to live, work, learn and visit.
- To build on our strong history of working together to build integrated health and social care offers which improve the quality and sustainability of care

3. Priorities

The Board has identified its priorities for the next two years as:

- **Integrated health and social care services which support prevention, early intervention and reduce hospital admissions.**

Medical treatments that were once provided in hospital are being increasingly delivered in the community, freeing hospitals to provide more complex, specialised and emergency care. As the drive to shift specialised and non-specialised care out of hospital gathers momentum, there is a greater demand for a skilled and competent community health and social care services to facilitate this shift at a local level. There is a need to ensure that the NHS and local authority focus acute and community care on prevention, self-management and providing support to transition patients smoothly across health and social care services to achieve an approach which is centered on improving the experience and getting better outcomes for patients.

- **Delivering the White City Collaborative Care Centre to improve care for residents and regenerate the White City Estate.**

Given the significantly poorer health outcomes in areas of deprivation in the borough and their roots in wider determinants such as housing, area regeneration presents a substantial opportunity to improve health and health care.

The White City Collaborative Care Centre (which will be called the Park View Centre for Health & Social Care) will deliver a high quality, modern health and

social care facility, within which health and social care providers will deliver co-ordinated care and also inform and support individuals, carers and their families so that they can be proactive in their own care. Patients and local residents should expect to receive a good experience of health and social care services provided in the building and the Centre will be a key resource in the area to provide wellbeing activities.

- **Every child has the best start in life**

Studies have found that foundations for virtually every aspect of physical, intellectual and emotional development are laid in early childhood. What happens during pregnancy and the early years of life has lifelong effects on many aspects of health and well-being– from obesity, heart disease and mental health, to educational achievement and economic status (from 2013 JSNA Highlight Report). Supporting the provision of cost-effective and timely support to mothers and young children is likely to impact positively across the full life course

- **Tackling childhood obesity**

Around a third of children at school age in Hammersmith and Fulham are either overweight or obese. Obesity in childhood greatly increases the chance of developing diabetes, heart disease and cancer later in life and can also be highly stigmatising. Programmes that successfully tackle child obesity are likely to have a substantial impact on life expectancy later in life

- **Supporting young people into Healthy Adulthood**

The physical, emotional and mental changes that occur during growth from children to adults, make young people particularly sensitive to environmental influences, including family, peer group and neighbourhood can be challenging and impact negatively on health and wellbeing. Encouraging and supporting young people to adopt acceptable social and health behaviours is key to them becoming successful adults and parents. It is important that we are able to provide the right services at the right time to support those who are most vulnerable and those who live in our most deprived areas and who currently take least advantage of the services we offer.

- **Improving mental health services for service users and carers to promote independence and develop effective preventative services.**

Those with mental ill-health tend to suffer from a range of physical health conditions, many of which are preventable. They also suffer from higher levels of unemployment and job insecurity. Others are supported in environments which no longer suit their needs. Improving services for those with mental ill-health and supporting more people in a stable community setting is therefore a priority

- **Better access for vulnerable people to Sheltered Housing.**

We aim to support people to live in suitable accommodation as they age, which will allow them to manage their health and care needs at home rather than having

to be admitted to hospital or needing to be placed in short or long term nursing care.

- **Better sexual health across Triborough with a focus on those communities most at risk of poor sexual health.**

In 2012/13, H&F had the 5th highest acute sexually transmitted infection rate in the country. The prevalence of HIV known to services is the 10th highest in the country. Early screening, treatment and management of sexually transmitted infections will reduce improve life and reduce costs.

It is expected that the pace of change over the next two years is unlikely to slacken, therefore there is a need to ensure that there is sufficient flexibility to keep pace with that change and to provide an opportunity to regularly review these priorities for going forward.

4. Role of the Health & Well-being Board

The Hammersmith and Fulham Health and Wellbeing Board will be inclusive and collaborative, working together to add value and develop a whole system approach to commissioning and the delivery of high quality, cost effective services for the borough. The Board will be focussed and decisive, being driven by the aim to have a positive impact on the lives of the residents of Hammersmith and Fulham and improve their health and wellbeing.

The new arrangements provide an opportunity for system wide leadership, to achieve more together than individual agencies could achieve alone. It will create a distinct and new identity, carrying new functions with the potential to deliver transformational change across the health, care and wellbeing landscape.

The emerging model for Community Budgets will be a vehicle for the Board to achieve its ambitions and requires further consideration to be made of how that might be realised.

5. The Strategy

The Strategy will provide a baseline against which we will measure success in developing integrated services which deliver real outcomes for residents. The next two years will continue to be a period of change when new relationships between the new structures and emerging organisations begin to mature. The Strategy will therefore need to be dynamic and flexible to accommodate these growing pains.

The Strategy will act as the framework to guide commissioning across health, public health and social care for both adults and children. The Council, the CCG and the NHS England will hold each other to account for commissioning in line with our shared priorities and values as expressed in this Strategy.

The Strategy will provide a framework and guide for the development of other plans which will address specific health and wellbeing issues.

The strategy is a two year strategy covering 2013 to 2015 to accord with the Kensington and Chelsea and Westminster HWSs, since the three councils share a number of services including adult social care, family and children's services and public health. Bearing this in mind it will probably be opportune to review the strategy regularly to take account of developments.

The Joint Strategic Needs Assessment (JSNA) has also been an important part of shaping the priorities of both the Council and CCG locally and are reflected in the Health & Well-being Strategy, a summary which demonstrates the links between the two is included as Appendix 1.

6. Delivering Outcomes

An outcomes based approach will be adopted when developing priorities, considering how work can focus on improving those outcomes that matter most to the population. These will need to be relevant and meaningful to the public, and to the work of the Board, and will be able to be measured and compared between areas and over time, to be broken down to focus on inequalities, and available from existing data.

A delivery plan is being developed for each priority and outcome, which will also reference all other relevant plans, policies and strategies. It will identify the work, resources and partnerships needed in order to achieve the desired outcome.

7. Our Approach

The combination of the HWBs, local democratic accountability and the new architecture for public health offer real opportunities for mutual influence on commissioning strategies, and allow for whole system plans and service models to be embedded into day to day operating practices and mechanisms.

Building on existing successful partnerships, developing trusting relationships across organisations, and engaging and communicating will be essential in order for the Board to be successful in delivering the aims and objectives of this strategy. Consideration must be given to partnership arrangements such as lead commissioning, integrated provision and pooled budgets, with attention also being given to operational integration health and social care services.

8. Measuring success

It is important to have clear and measurable objectives in order to assess the impact and performance of the work of the Board. The Board will produce an annual report and engage with stakeholders and the wider audience to ensure that work is focussed, targeted and addressing the greatest current need. Adopting outcomes in line with national outcomes frameworks (public health, adult social care, NHS outcomes frameworks, and children's and young people's outcome strategy) where possible allows the use of readily available data.

9. Next Steps

The Joint Health & Well-being Strategy has been developed to reflect local needs and sets out the priorities for the next two years. In order to keep up with the current

and anticipated pace of change means that there will be a need to review our priorities regularly to ensure they are still relevant.

This is a draft strategy which sets the baseline for joint working across public services in Hammersmith & Fulham. Over the coming weeks you are invited to comment on the strategy with the consultation period closing on **Friday, 20th December**.

Appendix 1

Table 1: Linkages between the JSNA and Health & Well-being Priorities

JSNA	Causes of Early Death		Causes of Disability				Outliers												
HWS Priorities	Cancer	CVD	Mental ill-health	Sense organ disease	Respiratory disease	MSK	Smoking	Alcohol related and specific	STDs	Poor dental health	Premature death (under 75)	Breast and cervical screening	Looked after children	Under 18 conceptions	HIV	Prison population	Severe and enduring mental illness	Welfare reform	Problem drug users
Integrated health and social care services which support prevention, early intervention and reduce hospital admissions.			✓								✓						✓		
Delivering the White City Collaborative Care Centre to improve care for residents and regenerate the White City Estate.											✓			✓					
Every child has the best start in life											✓		✓	✓					
Tackling childhood	✓	✓			✓						✓								

JSNA	Causes of Early Death		Causes of Disability				Outliers												
HWS Priorities	Cancer	CVD	Mental ill-health	Sense organ disease	Respiratory disease	MSK	Smoking	Alcohol related and specific	STDs	Poor dental health	Premature death (under 75)	Breast and cervical screening	Looked after children	Under 18 conceptions	HIV	Prison population	Severe and enduring mental illness	Welfare reform	Problem drug users
obesity																			
Supporting young people into Healthy Adulthood							✓	✓	✓	✓	✓		✓	✓	✓				
Better access for vulnerable people to Sheltered Housing.			✓	✓	✓	✓					✓							✓	
Improving mental health services for service users and carers to promote independence and develop effective preventative services.			✓								✓								
Better sexual health across Triborough with a focus on those communities most at risk of poor sexual health.									✓		✓			✓	✓				

[illegible]

[illegible]

[illegible]