

**12 February 2015**

## **8. REPORTS OF CABINET MEMBERS WITH RESPONSIBILITY**

### **REPORT OF THE CABINET MEMBER WITH RESPONSIBILITY FOR HEALTH AND WELL-BEING**

1. I would like to thank Council for the opportunity to report on the health and well-being portfolio. A lot has happened since I reported last to Council.

#### **Health and Well-being Board (HWB)**

2. The Health and Well-being Board (HWB) continues to lead efforts to improve health and well-being, and co-ordinates and reviews the progress of action through its Health Improvement Group (HIG). Through its Health Protection Group (HPG) it ensures that arrangements are in place to protect the public against infectious diseases and other threats to health.

3. During 2014 the Board took on a more prominent role in the integration of health and social care services, including agreement on the use of the Better Care Fund. In response to this the Board has reviewed and revised its constitution and membership and that of its sub-groups.

4. A summary of the work against the Board's main priorities and of its sub-groups is included below. In addition, during 2014, the Board has completed consultation on the Pharmaceutical Needs Assessment, considered and launched a Carers' Strategy and an Autism Strategy for consultation, and received reports from the Safeguarding Children and Safeguarding Adults Boards. The Board has also signed up to the Dementia Action Alliance, Carers Call to Action - and the Mental Health Crisis Care Concordat.

#### **Health Improvement Group**

5. The Health and Well-being Board has now agreed strategic plans against its three priorities of alcohol, obesity and mental health and well-being, following a period of consultation on each.

6. The Alcohol Plan has three main aims:

- Empowering individuals to take responsibility for their own and their families' drinking habits
- Creating a community environment where sensible drinking is the norm, and
- Improving treatment and rehabilitation services.

7. The Obesity Plan has four main aims:

- Empowering individuals to take responsibility for their own and their families' diet and physical activity habits
- Tackling the obesogenic environment

- Developing a healthy workforce, and
  - Developing robust care pathways.
8. The Mental Health and Well-being Plan has three priorities:
- To promote a universal approach to improving mental well-being through the active development of the 5 ways to well-being (Connect, be Active, take Notice, keep Learning, Give). This provides evidence-based advice, to empower individuals to take responsibility for their own and their families' mental health.
  - To raise awareness and early recognition of mental health problems and to promote early intervention and self-help across the life course, including through the recovery journey.
  - To improve information about suicide, and support for those who are bereaved or affected by it.
9. All of the Plans are available on the Council's website. Each of the Plans has an associated detailed action plan, and progress is monitored by the HIG, with children and young people's aspects considered by the Children's Trust arrangements.
10. The HIG has also approved and monitors the progress of the Strategic Drug Plan and the Tobacco Control Plan. In addition it considers local health and well-being schemes in each of the Districts with a view to sharing good practice.
11. The Council has signed the Local Government Declaration on Tobacco Control. This is a statement of the Council's commitment to ensure that tobacco control is given a high priority and to take action to reduce harm from smoking. The HWB is in full support and is encouraging District Councils to also sign the Declaration and local NHS organisations to sign the NHS Statement of Support.

### **Health Protection Group (HPG)**

12. On behalf of the HWB the HPG seeks assurance about emergency planning arrangements, as well as screening and immunisation programmes.
13. During 2014 the HPG considered the Cold Weather Plan and the Joint Outbreak Response Plan and ensured that there was clarity about the roles and responsibilities of local partners. It also endorsed a strategy for preventing and managing health and social care acquired infections.
14. The HPG received an update from Public Health England about local outbreaks and incidents of infectious diseases and non-communicable threats to health and noted that these were in line with expected levels and had been well managed. The HPG also considered the outcome of a desk-top exercise to test plans for responding to cases of Ebola, and noted that the risk to the UK population was extremely low.
15. The HPG also looked at performance updates on the main screening and immunisation programmes and noted that overall coverage and uptake is in line with national averages, although there may be some local variations that require further exploration.

## **Public Health**

16. In anticipation of the Care Act the Council is reviewing its approach to prevention, which includes: developing a healthy environment; encouraging and enabling individuals, families and communities to take greater responsibility for their health and well-being; providing information and advice; and commissioning of universal and targeted prevention services.

17. The Council actively supports Districts, businesses and schools to promote health and well-being. In the Districts our Health Improvement Co-ordinators support the development and sharing of local schemes. The Worcestershire Works Well programme has now signed up over 100 businesses with over 20,000 employees. We are working on a resource pack for governors to help them understand what their schools can do to promote health and well-being.

18. The Council is developing a new website that will include full information and advice for people about how to stay healthy and independent. I recognise that not everybody has the ability to get on line and access services via the internet. To tackle this issue directly we have a Digital Inclusion Strategy which will support access to the internet for those who cannot get online themselves.

19. This year I have approved re-commissioning of the drug and alcohol service and a new Living Well Service. The Drug and Alcohol Service offers specialist treatment for people with substance misuse problems. It has struggled for a number of years to hit its target for the number of people successfully completing treatment, and I hope that the new provider will be able to improve this position. The Living Well Service supports people to lead healthy lifestyles and is focused on those parts of the county where health is poorest. I will, through the professional advice and support from officers, be monitoring these areas to ensure that performance is improved.

20. The Council continues to lead local action on tobacco control and commissions smoking cessation services, which helped 3,000 people to quit last year. We also commission the National Health Checks Programme, sexual health services, falls prevention services for older people and school nursing services. Next year we will take on commissioning of Health Visitors.

## **Health and social care integration**

21. The HWB now has a significant role in the integration of health and social care services. I am pleased that the County has been given national Pioneer status, which reflects our progress with integration so far, and our ambition and potential to go further. This has given us access to national resources to support our plans to integrate services.

22. It has also given us the opportunity to influence national policy. During 2014 we hosted a visit from the House of Commons Health Select Committee and gave evidence to inform their enquiry into integration. In January 2015 we were visited by the Director General of the Department of Health who wanted to learn about what we are doing in Worcestershire and our views about how the Government could support the further integration of health and social care.

23. The work on integration supports our fourth priority, older people and management of long-term conditions. We have agreed a Five-Year Strategy for Health and Care in Worcestershire, which aims to support people to stay healthy and recover quickly following an illness, offer care in the most appropriate place and a seamless experience of services, and ensure the long term sustainability of the health and care system.

24. This Strategy is delivered through the projects that make up the Connected Programme, including identification of high-risk individuals, development of a single care record, and exploration of potential new provider arrangements, and is overseen by the Health and Adult Social Care Strategic Partnership Group.

### **Better Care Fund**

25. The Better Care Fund (BCF) has been created to support the integration of health and social care. It is not new money; rather it involves bringing together existing Clinical Commissioning Group and local authority budgets under the governance of Health and Well-being Boards.

26. In 2015/16 the Worcestershire BCF will total £37m. I am pleased to say that our plan for spending was one of the first in the country to be agreed by the Board and approved by NHS England. The plan includes expenditure on three main groups of services: Admission Prevention, Facilitated Discharge and Independent Living.

### **Timberdine**

27. The Timberdine residential and nursing unit in Worcester is one of our best examples of integrated services, with 28 general and 8 specialist stroke rehabilitation beds. Our Clinical Commissioning Groups intend to commission increased capacity during 2015/16, and I am very pleased that Council has agreed to allocate capital funding, from a Department of Health grant, for works to expand the unit.

### **Acute Hospitals Review**

28. I wrote in my last report that I was concerned about delays with the review of acute hospitals, and I am afraid that we have still seen little progress. An Independent Clinical Review Panel made a series of recommendations in January 2014, which were subsequently accepted by the Clinical Commissioning Groups as a basis for public consultation. <http://worcsfuturehospitals.co.uk/> refers. In brief:

- The Independent Clinical Panel supports a modified version of Option 1 (see Recommendation 3). This version of Option 1 describes a service that will provide high quality, safe and sustainable care for the population of Worcestershire. The Panel has recommended that this version of Option 1 is taken forward to Public Consultation.
- The Independent Clinical Review Panel does not support Option 2. Option 2 will result in a significant inequality in the provision of safe and sustainable services to the population of Worcestershire, having a particular impact on the population of Wyre Forest and South Worcestershire. The Panel has recommended that Option 2 is not taken forward to Public Consultation.
- The Independent Clinical Review Panel recommends that Worcestershire Acute Hospital Trust, working with its commissioners and provider

partners, establish a networked 'Emergency Centre' at the Alexandra Hospital.

- The Independent Clinical Review Panel recommends that Redditch & Bromsgrove CCG should consider commissioning a stand-alone Midwifery-led Unit in North Worcestershire.
- The Independent Clinical Review Panel recommends that the Worcestershire CCGs and WAHT should urgently review the safety and sustainability of emergency general surgery at the AH.
- The Independent Clinical Review Panel recommends that the Worcestershire CCGs, working with Worcestershire County Council, review the provision of public transport between North Worcestershire and the Worcestershire Royal Hospital in order to support access to high quality, sustainable and safe healthcare for the population of Worcestershire.

29. Unfortunately since then the Review appears to have become mired in NHS England assurance processes, most recently a review by the West Midlands Clinical Senate. Public consultation has been deferred until after the general election in May. The HWB has heard assurances from the local NHS that our acute hospitals remain safe. However, with health and adult social care services under unprecedented pressure this winter it is more important than ever that we have a clear plan for the future provision of services that is both clinically and financially sustainable.

30. Finally, I would like to place on record my thanks to the Director of Adult Services and Health and all of the teams and acknowledge the continued good working relationships that we have with our statutory and voluntary sector partners.

## **Marcus Hart**

Cabinet Member with Responsibility for Health and Well-being