

HEALTH AND WELLBEING STRATEGY: PERFORMANCE REPORT

Relevant Board Member(s)	Councillor Ray Puddifoot MBE Councillor Philip Corthorne
Organisation	London Borough of Hillingdon
Report author	Kevin Byrne, Policy and Partnerships
Papers with report	Appendix A: Health and Wellbeing Delivery Plan - progress update Appendix B: Latest Indicator Scorecard

HEADLINE INFORMATION

Summary	This report provides an update on progress against Hillingdon's Joint Health and Wellbeing Strategy Delivery Plan objectives (appendix A). It also sets out the outcome metrics (Appendix B)
Contribution to plans and strategies	Hillingdon's Joint Health and Wellbeing Strategy is a statutory requirement of the Health and Social Care Act 2012.
Financial Cost	There are no direct financial implications arising directly from this report.
Ward(s) affected	All

RECOMMENDATIONS

That the Health and Wellbeing Board:

- 1) notes the updates in the report and delivery plan (Appendix A); and
- 2) notes the outcome performance indicators in the quarterly dashboard (Appendix B).

INFORMATION

Supporting Information

Hillingdon's Health and Wellbeing Strategy was agreed by the Board in December 2014 and regular updates requested from partners setting out progress in delivery.

Four broad priority areas were identified through the Joint Strategic Needs Assessment (JSNA). A more detailed delivery plan and a scorecard of performance indicators was agreed to monitor progress against the Strategy.

Key highlights from the Delivery Plan under each of the priority areas are detailed below:

1. Priority one: Improving Health and Wellbeing and reducing inequalities

1.1 Smoking cessation. The estimated prevalence of adult smoking in Hillingdon has risen by 1% and remains slightly below the England average. Action to encourage quitting is being

taken through work with GPs, Pharmacies and specialist advisers. Training has been provided to 60+ healthcare professionals to increase the capacity to support residents wanting to quit. 45 out of 52 pharmacies in Hillingdon are now trained to provide stop smoking medication.

1.2 Helping adults with a Learning Disability find employment. Work is underway to design supported internships to increase the number of young adults with LD in paid employment.

1.3 Children's Health. Integrated GP Paediatric Consultant led clinics are bringing specialist expertise into GP practices. The new clinic will see children requiring observation, short-stay investigations and low-level observation enabling families to receive specialist care without being admitted to hospital.

1.4 Reducing obesity. Results from a 12 week adult weight loss pilot programme are being collated with initial results from the programme with pharmacies and Weightwatchers appearing to be positive. 376 people have completed the programme with good results in losing weight and reducing their waist measurement, and increased levels of physical activity. The 'This Hillingdon Girl Can' mother and daughter physical activity programme offered 29 free exercise sessions across the borough over 20 weeks. More than 500 people took part.

2 Priority 2 - Prevention and early intervention

2.1 Reablement and Rapid Response. 132 referrals were received during Q4 2015/16. 51 referrals came from the community, representing potential hospital attendances and so avoiding hospital admissions. 45 people were discharged from reablement with no further social care needs. 926 people were referred to the Rapid Response team during the quarter.

2.2 NHS Health Checks. Final figures for the programme in Hillingdon show that first offers increased by 2,084 (22%) compared to 2014/15. 7,700 checks were completed, an increase of 1,153 (17%) on the previous year. Health checks were provided at 7 community events, with over 230 carried out in Hillingdon libraries.

2.3 Long term conditions. Extra posts in Heart Failure Nursing and Cardiac Rehabilitation have been filled. Atrial Fibrillation and 24hr blood pressure monitoring pilot schemes are being reviewed, with the aim of improving care planning for patients, improving outcomes and reducing unplanned attendances and admissions. A new scheme to reduce the number of people found to have cancer following an unplanned attendance is in development. A new project to improve the care of people with several long-term conditions is also being explored.

2.4 Reduce the number of children with one or more decayed, missing or filled teeth. Two new NHS dental practices are planned in Harefield and West Drayton to increase the accessibility of NHS dentistry.

3 Priority 3 - Developing integrated, high quality social care and health services within the community or at home

3.1 Early identification of people susceptible to falls, social isolation and dementia. A review was undertaken of the falls prevention classes being delivered by the Council's Wellbeing Service under its exercise and referral programme. This twelve week programme

is intended to support people who have fallen to regain their confidence by assisting them to be as active as their ability allows and therefore reduce the likelihood of further falls occurring. As a result of the review, a further three classes a week will be delivered from Q1 2016/17.

3.2 End of life care. A proposal has been developed by the CCG on behalf of the multi-agency End of Life Forum. If the proposal is successful, it could see the injection of an additional £1.5m over three years to produce a more integrated model of end of life care for Hillingdon residents. The results of the submission are likely to be known in August 2016.

3.3 Home adaptations. In Q4 2015/16, 24 people aged 60 and over were assisted to stay in their own homes through the provision of disabled facilities grants (DFGs), which represented 43% of the grants provided. 55% (31) of the people receiving DFG's were owner occupiers, 36% (20) were housing association tenants, and 9% (5) were private tenants. The total DFG spend on older people (aged 60 and over) during Q4 2015/16 was £167K, which represented 36% of the spend during the quarter (£461k).

3.4 Carers Strategy. A successful presentation event to recognise the contribution made by Carers was held on 10 May. All those who were nominated and their cared for person were presented with framed certificates and flowers. Further engagement events are being planned for the next few months to seek Carers' views. The new contract for the Carers' service is due to start in September 2016.

4 Priority 4 - A positive experience of care

4.1 Children and Young People and families. A children and young people participation network has been established, making use of existing groups, e.g., special school councils, pupils attending SRPs, Merrifield House, voluntary organisations. This will be kept under review to ensure it is an effective way of increasing participation giving young people a voice in the review and design of services.

4.2 Improve social care service user experience. The target for the percentage of people who felt that they found it easy to gain access to information and advice about access to services and/or benefits was exceeded by 2%.

Financial Implications

There are no direct financial implications arising from the recommendations set out in this report.

EFFECT ON RESIDENTS, SERVICE USERS & COMMUNITIES

What will be the effect of the recommendation?

The update of the action plan for Hillingdon's Joint Health and Wellbeing Strategy supports the Board to see progress being made towards the key priorities for health improvement in the Borough.

Consultation Carried Out or Required

Updates of actions to the plan have involved discussions with partner agencies to provide up to date information.

Policy Overview Committee comments

None at this stage.

CORPORATE IMPLICATIONS

Hillingdon Council Corporate Finance comments

Corporate Finance has reviewed this report and concurs with the financial implications set out above TBC

Hillingdon Council Legal comments

The Borough Solicitor confirms that there are no specific legal implications arising from this report. TBC

BACKGROUND PAPERS

NIL.