

Hillingdon

Health and Wellbeing Strategy

2018-21

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Foreword

Welcome to our Health and Wellbeing Strategy. This is a strategy for everyone in Hillingdon. It sets out how people, public services, businesses, voluntary and community groups will join together so that everyone can access the best opportunities to be healthy and well.

Hillingdon is a healthy borough for people to live in. We have excellent leisure facilities, open green spaces and diverse resilient communities. Our local economy is strong and recent transport developments have already led to further growth with greater connections in the south of the Hillingdon. Health and wellbeing in Hillingdon is good overall, but we are determined to build on our record to date and make it even better for everyone

The NHS however faces a time of unprecedented challenge. Our task is to make the best use of our resources to provide high quality health and social care our growing population and need for more complex, seamless care. A strong partnership in health and care delivery partners in Hillingdon will help us to rise to meet these challenges.

Signed

CLlr Philip Corthorne

Chairman of Hillingdon Health and Wellbeing Board

1 Introduction

This strategy represents a commitment to prioritising prevention and early intervention. It will influence the commissioning and delivery of services and Hillingdon's Health and Wellbeing Board will continue to advise, inform and challenge decisions made about health and care in our borough.

When anyone in our communities experiences mental or physical ill health or is living with a physical or mental health disability and requires support, partners will come together to deliver high quality care in a setting that is appropriate and convenient for patients and service users.

Hillingdon's local STP takes the five delivery areas set at NW London level and maps local priorities onto them. This strategy reflects the local plan and utilises the delivery areas to set out local activity.

These priorities will be the focus of Hillingdon's Health and Wellbeing Board over the next four years. We will focus on prevention and wellbeing rather than treating illness. We will ensure healthcare is delivered consistently well and improve the management of long term conditions. We will achieve better experience and greater choice for older people in our communities. We will improve outcomes for children and adults with mental health and wellbeing needs and we will ensure we have safe, high quality sustainable hospital services.

We will deliver on our priorities by addressing quality of life, people's experience of our health and care system, Outcomes for each delivery area set out our aspirations for the health and wellbeing of people in Hillingdon. We will develop a detailed implementation plan that will identify how we will put our commitments into action. The delivery of the plan will be overseen by the health and wellbeing board as the Leader of the Borough's health and care system bringing together the Council, Hillingdon Clinical Commissioning Group, our main providers in The Hillingdon Hospital, The Central and North West London Mental Health Trust and The Royal Brompton and Harefield Hospital and Hillingdon Health watch.

2 Our people and communities

Hillingdon is a diverse, prosperous borough in West London bordered by Hertfordshire, Buckinghamshire, Hounslow, Ealing, and Harrow. We have a growing population - our residents are living longer and we have seen significant increase in the number of new births in recent years. Population estimates indicate we were 309,300 residents strong in 2016, and forecasts suggest we can anticipate a figure of 321,000 in 2021.

Hillingdon is a borough of contrasts. It is the second largest of London's 32 boroughs covering an area of 42 square miles (11571 hectares), over half of which is a mosaic of countryside including canals, rivers, parks and woodland, and includes Ruislip Woods National Nature Reserve. The north of the borough is semi-rural with a large proportion protected by green belt regulation with Ruislip as the major centre of population. The south of Hillingdon is more densely populated, urban in character and contains the administrative centre of Uxbridge and towns of Hayes and West Drayton. Hillingdon is a borough where town and country meet, boasting 800 acres of woodland, country parks, fields and farms, several rivers and the Grand Union Canal. We have more land under prestigious Green Flag status than any other local authority.

In addition to greenspace, there are a range of opportunities to live well including:

- Ruislip Lido, which boasts one of London's few sandy beaches.
- The Hillingdon Sports and Leisure Complex, a multi-million pound Olympic-sized indoor swimming pool and leisure complex, which includes a restored 1930s open-air pool.
- The country's first playground designed specifically for disabled children.
- The picturesque villages of Harefield and Harmondsworth.
- Four public golf courses.
- Various theatres, arts centres and state of the art libraries.
- Uxbridge shopping centre, one of the top-ten shopping centres in London is also located in Hillingdon.

Hillingdon is the home of Heathrow Airport, Hillingdon is London's foremost gateway to the world, and is also home to the largest RAF airport at RAF Northolt. Heathrow airport is situated in the south of the borough and is the largest employer offering a range of relatively well-paid skilled and unskilled manual positions. There are a number of major manufacturing and retail organisations with headquarters and sites in Hillingdon. Stockley Park, to the north of Heathrow, is one of Europe's largest business parks. Hillingdon Council, RAF Northolt, Brunel University, Harefield and Hillingdon hospitals are major public sector employers within the area.

Hillingdon boasts significant infrastructure and recent investments continue to enhance the local economy. We are the home of Heathrow Airport, London's foremost gateway to the world. Heathrow airport is situated in the south of the borough and is the largest employer offering a range of relatively well-paid skilled and unskilled manual positions. There are a number of major manufacturing and retail organisations with headquarters and sites in Hillingdon. Stockley Park, to the north of Heathrow, is one of Europe's largest business parks. We are also home to the largest RAF airport at RAF Northolt. Hillingdon Council, RAF Northolt, Brunel University, Harefield and Hillingdon hospitals are major public sector employers within the area. Hillingdon residents in the south of the borough can also anticipate greater transport links with Elizabeth Line (Crossrail).

3 Our local health and care system

Notes:

- organisations involved in providing care
- major investments
- digital infrastructure – relatively mature
- interaction with NWL STP
- Likeminded
- Tele/e-health services
- Existing service support to manage LTCs
- Ongoing dialogue/engagement with patients and residents
- Rehabilitation programmes
-

4 Our local health and wellbeing needs

Our local health needs are derived from the Hillingdon Joint Strategic Needs Assessment (JSNA). The JSNA looks at the information available for the community of Hillingdon and tells the story of the local population in terms of health and wellbeing. By providing analyses of the data it is possible to show the current and future health and wellbeing needs of the population, over both the short-term and the longer term to inform strategic planning. We highlight below the main health needs for Hillingdon.

Overall, the health and wellbeing of Hillingdon's residents is good and continues to improve. Based on key indicators and other data, the key headlines from the needs analysis shows that for people living in Hillingdon compared to England on average:

- Life expectancy for both men and women in Hillingdon is higher.
- Lower levels of mothers smoke during pregnancy.
- There are higher levels of breast feeding.
- Children living in deprivation are lower.
- Levels of teenage pregnancy are similar to that of England.
- Hospital stays related to alcohol and self-harm are lower.
- Long term unemployment is lower.
- Rates of homelessness are lower than England.

As with all Boroughs, local analysis indicates some challenges to improve health and wellbeing. These include:

- Historically higher levels of violent crime in Hillingdon.
- Higher rates of sexually transmitted infections and tuberculosis.
- People diagnosed with diabetes in Hillingdon is higher than average.
- The percentage of physically active adults is lower than England.

The biggest cause of death in Hillingdon continues to be cardio-vascular disease (heart disease and stroke), cancer and respiratory diseases. Diabetes is a significant cause of illness (morbidity) and predisposes to other diseases e.g. heart disease and stroke, kidney disease and blindness. Certain lifestyle factors will increase the risk of ill-health, including smoking, poor diet, lack of regular

exercise and higher levels of alcohol consumption and/or binge drinking. Age and other related conditions also affect health and wellbeing. Many people aged 65 and over are diagnosed with one or more long term conditions, of whom over half are typically diagnosed with multiple long term conditions which increases dependency on care and support. Other conditions include learning disability and child and adult mental health, including dementia. To improve health and wellbeing, commissioning plans should consider how to prevent ill health, early identification of any long-term condition, early intervention to prevent harm from long term conditions and tackling risk factors.

Our key local health and wellbeing needs are summarised below.

4.1 Giving children the best start in life

Levels of excess weight and obesity are a growing threat to population health. Currently, excess weight in 4-5 year olds is 21% and, in 10-11 year olds is 32.6%. In 2021 we want to see sustained reductions in excess weight in line with the national ambition to give children a better start in life.

4.2 Provide opportunities to live an active lifestyle

Excess weight prevalence in adults (63.4%) is similar to the national average (64.6%), with 55% of our residents saying they are physically active. Hillingdon's utilisation of outdoor space (14.7%) is however below the national average (17.9%), despite the significant amount of greenspace and active opportunities in the borough. We want to ensure everyone has the opportunity to live an active lifestyle. As such, Hillingdon Council is working on increasing activity levels through a number of initiatives and by 2021 we aim to see an increase physical activity rates in all age groups.

4.3 Reduce smoking prevalence

Smoking prevalence in those aged over 18 in Hillingdon is 17.1%. This is similar to the England average (18%) and the London average (17%). Meanwhile, smoking in pregnancy is 7.4% which is better than England (11.4%), but worse than the London average (4.8%). In order to enhance the good health and wellbeing of mothers and children in Hillingdon, in 2021 we aim to reduce smoking prevalence in pregnancy due to high levels of premature births in Hillingdon.

4.4 Reduce alcohol and drug admissions to hospital

Alcohol related admissions to hospital indicate a significant need for strong social care and support for those living with addiction. Hillingdon already has liaison and support services in place, and we aim to continue to improve upon our track record.

4.5 Support good mental health

Good mental health is of great importance to ensuring the health and wellbeing of our people and communities. The prevalence of self-reported depression and anxiety in the Hillingdon GP registered population is 9.9%, with hospital admissions for self-harm (10-24 years) was 234.7 per 100,000 population. By 2021 we will have improved pathways and response for individuals with mental health needs through our Children and Adults Mental Health Services (CAMHS). We want to ensure those with Serious Mental Illness, Learning Disabilities, and Anxiety have access to the right care, advice, and support.

4.6 Improve social networks

Social isolation remains a challenge in an age of significant digital connectivity. Currently, the proportion of people who use services (43%) and their carers (26%) who reported that they have as much social contact as they would like. In 2021, we will have embedded opportunities to enhance social networks that will see a sustained increase in users and carers who report getting as much social contact as they would like.

4.7 Support to manage long term conditions

Health and wellbeing needs are growing increasingly complex, with more and more people reporting living with chronic conditions. Long term conditions such as diabetes, respiratory (COPD/asthma), neurological (eg epilepsy), and heart disease, with some people managing multiple conditions, are a unique challenge to health and wellbeing today. Health and care partners are working on a common understanding of identifying risk factors for morbidity and mortality from long term conditions to better provide support for managing need in the borough.

4.8 Cancer

Cancer screening rates in Hillingdon are lower than the national average, with too few patients diagnosed in the early stages, enabling a swifter response and better health outcomes. We have recently invested in enhanced cancer screening and survivorship services in Hillingdon, but more must be done. We aim to improve cancer screening and diagnosis to national targets by 2021.

4.9 Older people

Our population is aging and the number of people enjoying their retirement years is increasing. We will ensure we have responsive services to deliver joined up, coordinated care as individual needs evolve.

5 Our vision and aims

5.1 Vision

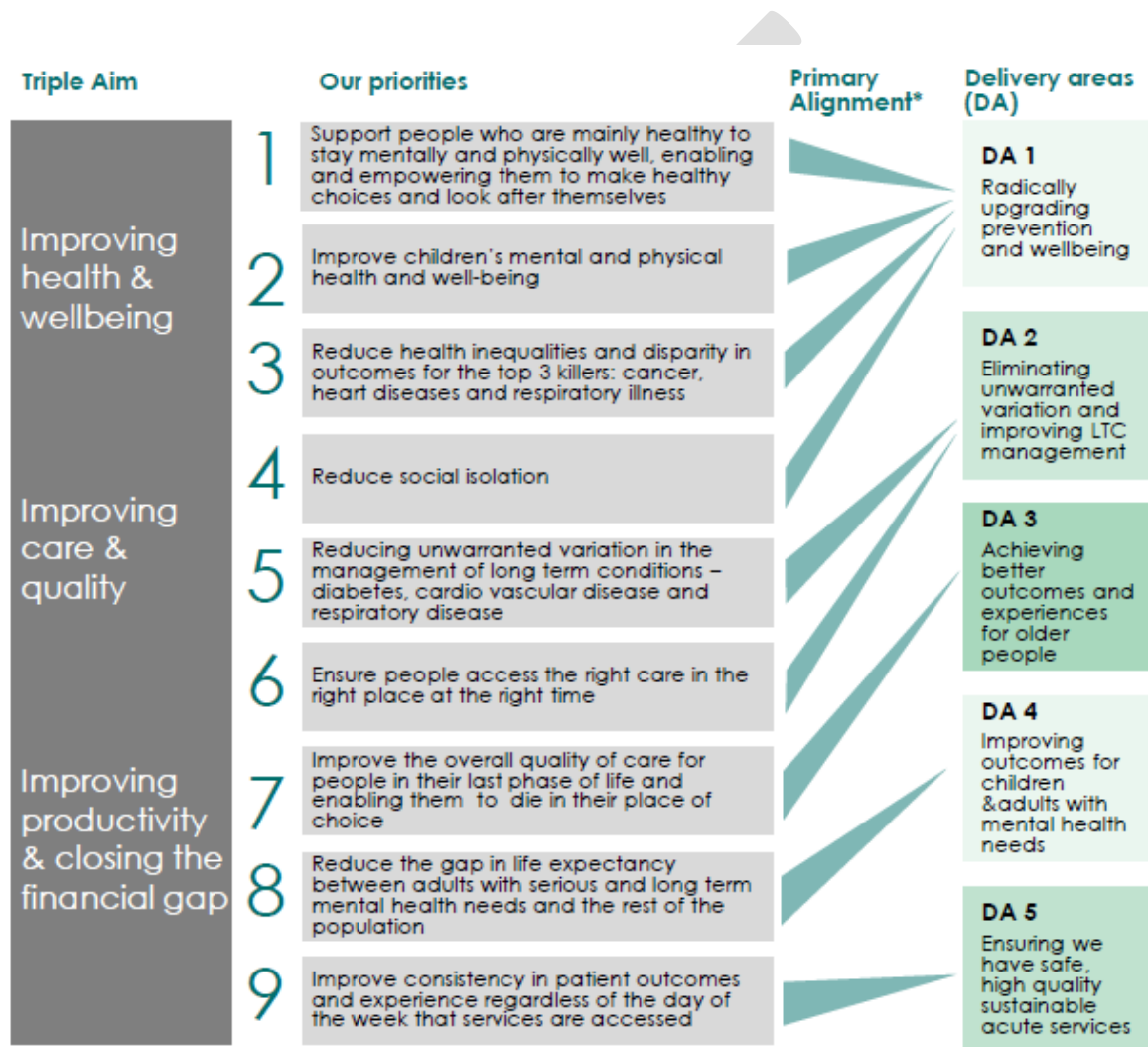
In order for this strategy to work, all partners need to work towards an agreed and common set of outcomes.

We want residents to be able to say:

- "I am helped to take control of my own health and social care provision"
- "It doesn't matter what day of the week it is - as I get the support appropriate to my health and social care needs"
- "Social care and Health Services help me to be proactive. They anticipate my needs before I do and help me to prevent things getting so bad that I need to stay in hospital"
- "If I do need to go to hospital, they start to plan for my social and health care in the community from day one of my stay"
- "I only have to tell my story once and they pass my details on to others with an appropriate role in my care"
- "I am treated with respect and dignity, according to my individual needs"
- "Systems are sustainable and what once might have been spent on hospital care for me is now spent to support me at home in my community"

5.2 Aims, Priorities and Delivery Areas

Hillingdon plans will align to the Triple Aims, Priorities and five Delivery Areas of the NWL STP to ensure a coordinated response to local needs within the broader footprint. The North West London Sustainability and Transformation Plan (NWL STP) sets out the shared Triple Aims for the five years to 2021 for all of NWL, of which Hillingdon is a locality. The STP brings together health and care organisations in partnership to deliver genuine place-based plans. The STP will act as a platform for the development of new and innovative ways of delivering health and care in Hillingdon. We describe in the following sections our local approach to achieving NWL-wide goals.



5.2.1 Aims

5.2.1.1 Health and Wellbeing

We will work collaboratively across health, social care and public health we will improve outcomes and reduce inequalities for our population with a focus on those with both traditional Long Term Conditions (including both physical and mental health LTCs) and emergent categories of LTCs such as pain, frailty and social isolation.

Our coordinated programme of work will bring together our existing plans for the Better Care Fund (BCF) and our Health & Wellbeing Strategy and engage our whole community to create a resilient population and assist people to remain independent with a better quality of life for longer.

5.2.1.2 Care & Quality

We will provide care that is safe, effective and delivered by experienced practitioners through collaborative working across health and social care services. We will be able to share information that improves the quality of health and social care services and that enables our population to make informed choices. We will deliver the best and highest quality care possible within the constraints of our local economy and the growth in demand that we are predicting.

5.2.1.3 Sustainable services

We are committed to ways to achieve better outcomes for individuals and their families through the better integration of services and an increased focus on prevention and supported patient empowerment to manage their condition(s).

5.2.2 Delivery Areas

5.2.2.1 DA1 – Prevention and Wellbeing

Our focus will be on developing services that place far greater emphasis on keeping people healthy and well in order to lead longer, more illness-free lives; preventing rather than treating illness. Our healthcare services will be focused on engaging people in keeping healthy. People in Hillingdon will have the support they need to manage of their own health and maintain their independence.

Key transformation themes:

- Better Care Fund integrated working
- Prevention of disease and ill health
- New primary model of care at scale
- Integrated care for children and young people
- Mothers and babies

5.2.2.2 DA2 – Supporting Long Term Conditions

Healthcare services in Hillingdon are still not sufficiently joined up and do not deliver the best outcomes for patients. Services will work better together and there will be a reduction in variation in both quality of care and access to care throughout our Borough. Patients will receive more responsive, personalised care delivered out of hospital in a safe and effective way; such as our existing dermatology and pain management services. People with long term conditions will be supported to help lead a healthier life.

Key transformation themes:

- Integrated support for people with long term conditions
- Transformation care for people with cancer

5.2.2.3 DA3 – Improving Older People's care

Our health and social care services will work better together to ensure local people receive better coordinated care –especially those with multiple long term conditions. The expansion of our

community outreach programme will provide support for nurses and carers working to help their patients stay in the home for longer, rather than being taken into hospital. Mental health professionals and GPs will work better together with care home staff so they can help patients more effectively. We will have community based teams of local specialist clinicians including practice and community nurses, social care workers, allied health professionals, community mental health workers, GPs, and geriatricians.

Key transformation themes:

- New model of integrated care for older people
- Integrated service and coordinate support for people at the end of life

5.2.2.4 DA4 – Improving outcomes for children and adults with mental health needs

People in Hillingdon with mental health needs will have a single point of access and their requirements identified early to ensure prevention and improved wellbeing. Those with long term conditions will have psychological support in a community setting through local well-being and prevention services that are provided by primary, community and social care services working together in a coordinated way. Community based services will provide urgent, enhanced crisis and out of hours support giving people the care they need, in the best place and in a timely manner providing better opportunities for healthy active lives.

Key transformation theme:

- Effective support for people with mental health needs

5.2.2.5 DA5 – Ensuring we have safe, high quality sustainable hospital services

Our hospitals will operate to a higher quality without the need for extra unplanned financial support with the ability to respond more effectively to increases in demand and provide more efficient diagnosis, timely triage and consultant services and effective transfer and discharge processes. Patients will see care beyond general practice services including specialist primary care outpatient clinics, treatment diagnostics and urgent care. Services will be coordinated and people in Hillingdon will receive complete 'joined up' care.

Key transformation themes:

- Transformation in local services
- Integration across urgent and emergency care services

5.2.2.6 Enablers

- Developing the Digital Environment for the Future
- Creating the Workforce for the Future
- Delivery of our Statutory Targets
- Medicines Optimisation
- Redefining the Provider Market

6 Our priorities and plans

Notes:

- One system, one strategy

6.1 Delivery to date

[Summary of achievements in 2017 from workplan]

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7 Our priorities and plans

7.1 Delivery Programme 2018-2019

Delivery Area & Transformation Theme	2018	2019
DA1 Radically upgrading prevention and wellbeing		
Better Care Fund	<ul style="list-style-type: none"> •Evaluation of the effectiveness of interventions / schemes, and assessment of impact of benefit realisation on the NHS and LA 	
Prevention of Disease and ill-health	<ul style="list-style-type: none"> •By the end of 2017 we will have rolled out a Joint Physical Activity strategy •From April 2017 we will begin to implement our Prevention Strategy 	<ul style="list-style-type: none"> •By January 2018 the Hillingdon Prevention Strategy will be fully implemented
New Primary Model of Care	<ul style="list-style-type: none"> •Rollout of Proactive Case Finding in Primary Care to be ready by September 2017 •Rationalisation of Primary Care Contracts and investment in enhanced, at scale primary care •Implementation of Primary Care Model of Care 	<ul style="list-style-type: none"> •Delivery of Primary Care Model of Care
Integrated care for CYP	<ul style="list-style-type: none"> •Delivery of wellbeing training programme for schools •Improved access to consultant led paediatric services •Rollout SPA for CYP 	<ul style="list-style-type: none"> •Further delivery of wellbeing programme training programme for schools •CYP SPA –evaluation process
Mothers and babies	<ul style="list-style-type: none"> •Implementation of the recommendations from the audit of neo-natal births & babies screening programmes 	

Delivery Area & Transformation Theme	2018	2019
DA2 Eliminating unwarranted variation and improving LTC management		
Integrated Support for People with Long Term Conditions	<ul style="list-style-type: none"> •By June 2017 we will roll out our approach to tackling co-morbidities and complex needs •By June2017 we will complete analyses to help us close the gap between those who have diagnosed and un-diagnosed LTCs •By September 2017 we will have mobilised new AF and stroke pathways and services •By September 2017 we will have expanded the Empowered Patients Programme to cover a wider range of conditions •We will expand Personal Health Budgets in Hillingdon, putting patients in charge of their treatment options •Expand the usage of Patient Activation Measures (PAM) •Expand access to and use of online information and advice 	<ul style="list-style-type: none"> •Proactive identification and engagement at primary care level with groups at high risk of developing LTCs •By March 2019 we will have evidence of closing the prevalence gaps between those with diagnosed and un-diagnosed LTCs •By April 2018 we will complete evaluation and further development of Empowered Patient Programme •Further implementation of Personal Health Budgets focusing on patients outside of Continuing Care •Expanded access to and use of online advice •Evaluation of screening outreach programmes •Psychological support to people with long-term conditions will be fully embedded within Hillingdon health systems
Transforming Care for People with Cancer	<ul style="list-style-type: none"> •Ongoing rollout of actions from our Cancer Improvement Plan •Continued delivery of National Cancer Vanguard Programme 	<ul style="list-style-type: none"> •By March 2019 we will complete a review and evaluation of our Cancer Improvement Plan •We will continue delivery of the National Cancer Vanguard Programme

Delivery Area & Transformation Theme	2018	2019
DA3 Achieving better outcomes and experiences for older people		
Integrating Services for People at the End of their Life	<ul style="list-style-type: none"> •Rollout of the EoL Strategy and new integrated service model 	<ul style="list-style-type: none"> •Delivery of EoL Strategy and new integrated service model
Transforming Care for Older People	<ul style="list-style-type: none"> •By April 2017 we will have embedded Care Connection Teams across Hillingdon •From April 2017 we will rollout new models of care for care homes integrating Primary, Community and Secondary Care support including embedding the use of frailty tools •Implementation of post discharge follow ups in the community •Increase access to Coordinate My Care (CMC) •By April 2017 we will achieve full integration of Co-ordinate my Care and Primary Care clinical systems •Ongoing implementation of the Hillingdon Carers Strategy 	<ul style="list-style-type: none"> •Evaluation and further development of programmes focussed on the care homes population •Further expanded access to Coordinate My Care (CMC) for proactive care planning
DA4 Improving outcomes for children & adults with mental health needs		
Effective Support for people with a Mental Health need and those with Learning Disabilities	<ul style="list-style-type: none"> •Delivery of the Like Minded Programme •Improve support for patients with MH related LTCs •Implement MH support for people with a physical LTC •Expand integrated care planning to include people with MH needs •Rollout new model of Community MH Support •Development of psychological support for people with long-term conditions including access to Talking Therapies •Implementation of the strategy for adults and children with autism •Implement crisis and out of hours support for CAMHS 	<ul style="list-style-type: none"> •Ongoing delivery of the Like Minded Programme •Delivery of new model of Community MH Support •By January 2019 full operational delivery of the strategy for adults and children with autism •By March 2019 we will complete evaluation of support programmes for patients with MH related LTCs •Delivery of Community LD Services

Delivery Area & Transformation Theme	2018	2019
DA5 Ensuring we have safe, high quality, sustainable acute services		
Transformation in Local Services	<ul style="list-style-type: none"> •Provide medical retina services at Mount Vernon hospital to treat macular degeneration •Focus on additional 7 Day Standards •Enhanced progression of BHH RightCare Programme in line with strategic plans developed in October 2016 	<ul style="list-style-type: none"> •Full implementation of 7 Day Standards •Enhanced progression of BHH RightCare Programme
Integration across Urgent & Emergency Care Services	<ul style="list-style-type: none"> •Develop ambulatory acute care for frail elderly by adopting a networked approach •Finalise Local Services Strategy for Hillingdon •Rollout new 111 Service and Primary Care Triage Model 	
Enablers		
Redefining the Provider Market	<ul style="list-style-type: none"> •By June 2017 we will have rolled out the accountable care partnership model of care for older people 	<ul style="list-style-type: none"> •Further development of the ACP Model
Developing the Digital Environment for the Future	<ul style="list-style-type: none"> •Additional promotion of assistive technologies eg telecare and telehealth •Delivery of a paperless system through the full integration of Co-ordinate my Care and primary care clinical systems 	

7.2 Areas for focus 2019-2020

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