HILLINGDON'S JOINT HEALTH AND WELLBEING STRATEGY 2018-2021

Relevant Board Member(s)

Councillor Philip Corthorne Dr Ian Goodman

Organisation

London Borough of Hillingdon Hillingdon CCG

Report author

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Papers with report

None

1. HEADLINE INFORMATION

Summary

This paper proposes an approach to reporting against the Hillingdon Joint Health and Wellbeing Strategy 2018-2021, which was agreed by the Board on 12 December 2017.

It also highlights key current issue that are considered important to bring to the Board's attention regarding progress in implementing the Strategy.

Contribution to plans and strategies

The Hillingdon Joint Health and Wellbeing Strategy (JHWBS) and the Hillingdon Sustainability and Transformation Plan (STP) local chapter have been developed as a partnership plan reflecting priorities across health and care services in the Borough. Both are closely aligned to the North West London STP to ensure that delivery meets the needs of local people and supports development of solutions in the best interests of health and care in Hillingdon.

The JHWB strategy encompasses activity that is underway including through various commissioning plans, the Better Care Fund and in taking Hillingdon towards an Accountable Care System.

Financial Cost

There are no costs arising directly from this report.

Ward(s) affected

All

2. RECOMMENDATION

That the Health and Wellbeing Board notes the proposals to take forward performance management of the Hillingdon Joint Health and Wellbeing Strategy, through the Hillingdon Transformation Group, and to report back to the Board at each of its meetings.

3. INFORMATION

Background Information

1. Performance and Programme management of the Joint Strategy

1.1. Background

The Board agreed the Hillingdon Joint Health and Wellbeing Strategy at its meeting on 12th December 2017 and requested that the Hillingdon Transformation Group develop proposals to offer the Board assurance that the priorities in the strategy were being implemented. It was also recognised that existing reporting requirements should be utilised so that the approach was proportionate and could be achieved within existing resources.

The Board also reiterated its ambition to have in place one overarching strategy for Hillingdon and one overall progress report. It also recognised that this will only be achieved over time, given the number of different reporting arrangements required through each governing body and onwards to NHSE such as for the STP and the Better Care Fund plan.

The transformation agenda is overseen through joint working via the Hillingdon Transformation Board, which includes the chairman of the Health and Wellbeing Board (HWB) amongst its membership. Supporting the Transformation Board is the Hillingdon Transformation Group and this is focused on programme management. Discussions at the Transformation Group provide oversight of the actions and help to streamline reporting upwards to the HWB on matters of significance.

1.2. Developing Reporting

The Hillingdon Transformation Group is monitoring progress against the five "Delivery Areas" and ten "Transformation Themes" in our local STP. As part of enhancing oversight, the Group is supporting the development of a standard, operationally-based Highlight Reports for each Transformation Theme. Once finalised and fully in place, the Highlight Reports will be aggregated into a single Progress Report for submission to the Transformation Board and HWB.

The Highlight Reports will provide a narrative update, set out strategic objectives, outline upcoming and completed project phasing, highlight risks and issues requiring discussion, and next steps. The strategic objectives include key Public Health Outcomes Framework (PHOF) indicators relevant to each Delivery Area comparing Hillingdon's position with the England average, and are aligned to the priorities of the NWL STP and Hillingdon JHWBS.

A draft version of the proposed Highlight Report was reviewed at the January meeting of the Group and felt to provide the right level of detail for the Hillingdon Transformation Group to manage operational-level delivery. The example covered the Transformation Theme of delivering Integrated Care for Children and Young People, for which key outcomes include enhancing coordination of support provided by health and social care services, improving outcomes for children and young people with long-term conditions, reducing unplanned care needs and risks of harm, and increasing vaccination rates. It also includes reducing hospital attendances and reducing the numbers of mothers who smoke, as well as improving the initiation and continuance of breastfeeding. A highlight report for this key objective could

include, under the headings above, progress updates on local vaccination programmes, the roll out of integrated community children's clinics, asthma care services, continuity of care in maternity services, and the joint review of therapy provision. Alongside this PHOF measures would be shown including breastfeeding initiation and continuance, smoking status of mothers at time of delivery, teenage conception rates, child obesity rates, dental decay in five year olds, hospital admission and immunisation rates.

Work is continuing to develop a highlight report for each of the priority areas. The process will also take into consideration reporting covering activity by NHS and Council services as well as provision by other agencies.

Once set up, the highlight reports will assure the Hillingdon Transformation Group of delivery achievements and risks to support discussion and mitigation between stakeholders. These individual reports will then be summarised into a single overarching Progress Report which will be presented to the Hillingdon Transformation Board with a borough based account of progress, setting out red performance issues and mitigation of risks. This will be important to ensure that the HWB is able to consider the health and care system issues from a local perspective. We envisage that the HWB report moving forward would be based on the summary Progress Report containing top issues that require decision or noting at the higher level strategic Board. Toward this format, this paper sets out the current key issues below by Delivery Area and Transformation Theme as a first step in assuring the HWB of prioritisation and progress to achieving local JHWBS outcomes.

2. Current Key Issues

Delivery Area, Transformation Programme and Progress Update

DA 1 Radically upgrading prevention and wellbeing

T9. Public Health and Prevention of Disease and ill-health

- A new Prevention working group is in development, which will aim to address local public social, health and prevention priorities.
- A draft public health core offer to the CCG from 2018/19 is in development.
- An updated Hillingdon Carers Strategy is being developed for consideration by the Council's Cabinet and the CCG's Governing Body.
- A draft Hillingdon Suicide Prevention Plan has been produced and a working group set up to review and move it to delivery.

T7. Integrated care for Children and Young People

Integrated community paediatric clinic roll-outs in the north of the borough have begun from midend January. Work continues to facilitate integration between services, as well as identify top-presenting LTCs to support prioritisation of the children's agenda going forward. Additional focus is needed on vaccination programme and approach to improve immunisation rates.

T2. New Primary Care Model of Care

An increasing number of activities are taking place within GP surgeries to prevent avoidable attendance and admission to hospital. Linked to this is the new preventative role being undertaken by the 15 Care Connection Teams, 14 of which are now operational. The challenges posed by the expanded role within the context of a growing population with more diverse and complex needs warrant a continuing focus of attention.

DA2 Eliminating unwarranted variation and improving LTC management

T4. Integrated Support for People with Long Term Conditions

Many long-term conditions, e.g. heart disease, stroke, diabetes and kidney disease, are preventable and a key challenge is to support healthier lifestyles to reduce the number of people acquiring these conditions. Another challenge is how to encourage people to self-care should they acquire such a condition. This will help to prevent hospital attendances and admissions that are avoidable.

Dementia is also a long-term condition mainly attributed to old age and it is expected to pose particular challenges to Hillingdon's health and care system as the numbers aged 80 and over increase.

Locally, Hillingdon is implementing respiratory/COPD clinics, early diagnosis and prevention of stroke through managing atrial fibrillation and hypertension, diabetes management in the community, primary care and at home, as well as empowering patients through the MyHealth programme and patient activation measures.

T5. Transforming Care for People with Cancer

Testing, research and piloting of safety-netting in GP practices is underway to support improved awareness and timely, early diagnosis of cancer. This will support evaluation of screening and outreach to identify best practice. Additionally, direct access (DA) and straight-to-test (STT) pathways are being improved with to support access and maintain the high standard of care in Hillingdon. For survivors of prostate cancer, follow-ups in the community are being implemented with good initial take-up from GPs as from December, with the potential to develop community self-support models being reviewed as part of a survivorship model. New priorities for 18/19 include colorectal and lung cancers.

DA3 Achieving better outcomes and experiences for older people

T3. Integrating Services for People at the End of their Life

Implementation of the new integrated service model has been delayed due to the scarcity of skilled palliative and end-of-life care health workforce to support overnight care. Enhanced focus in this area has nevertheless seen improve access and use of the Coordinate My Care (CMC) Record, and improving coordination between existing services as part of efforts to achieve integration goals.

T1. Transforming Care for Older People

Integration between health partners and also between health and social care is likely to be a continuing theme. It is indicated above where integration between health and social care and/or closer working between the NHS and the Council, is contributing to meeting the needs of residents and is reflected in the BCF plan. The BCF performance report on the Board's agenda addresses the prospective next steps in the Government's integration agenda.

DA4 Improving outcomes for children & adults with mental health needs

T6. Effective Support for people with a Mental Health need and those with Learning Disabilities

A key issue that applies equally to people with mental health needs and people with learning disabilities is the development of pathways that support people into the least restrictive living environment possible. Supporting the transfer of people with autism into the community from long stay specialist hospitals is included within this.

Addressing crisis care needs to prevent frequent but avoidable attendances at A & E is also an important issue.

Hillingdon will also need to respond to the Mayor's consultation on pan-London health-based places of safety provision, e.g. those circumstances where the Police identify someone who appears to have a mental disorder and is in need of a place of safety.

Hillingdon has made progress in delivering the commitments in the Local Transformation Plan for children and young people. 14% more young people with mental health problems have been seen than last year and more of those people are being seen within the 18 week time frame. The most vulnerable Children and Young People and those in crisis are seen more rapidly and closer to home. The THRIVE model is being rolled out in partnership with all providers, schools and community groups and a network established. A fuller report is included in this meeting's agenda.

DA5 Ensuring we have safe, high quality, sustainable acute services

T10. Transformation in Local Services

Good progress has been made against the delayed transfer of care targets set out the Better Care Fund report, despite challenges of winter and increased demand affecting A&E waiting times.

Intensive work between partners to transform the hospital discharge model is underway, the results of which will be implemented during Q4 2017/18. A key outcome will be a single point of referral within Hillingdon Hospital for all discharges. More information on progress in this area is contained within the BCF report separately on this meeting's agenda.

Work with partners is also underway to address delayed transfers of care (DTOCs) attributed to mental health, which represent the greatest proportion (60%) of delayed days for Hillingdon.

T8. Integration across Urgent & Emergency Care Services

Hillingdon is participating in the development of a NWL wide integrated urgent care approach and in particular the rollout of the new 111 service model. The UCC has recently been re-commissioned with enhanced KPIs to national guidance and the service will continue with the current provider. New guidance encouraging greater focus on Ambulatory Care Pathways is supporting existing and ongoing local efforts in this area. Unplanned attendances to A&E are nevertheless rising, and greater community awareness to accessing earlier care and clinical guidance from GPs, nurses, and other health staff will support improved population health outcomes. The CCG held a health roadshow for 3 months September – December 2017, and has invested in extended primary care hours to support enhanced, non-emergency care access and capacity in Hillingdon.

Enablers

E1. Developing the Digital Environment for the Future

Hillingdon is seeing improved access to shared care records, with the focus turning to support stakeholder organisations to use these in day-to-day operations to support personalised care. The local system is also implementing a 'Paper Switch Off' date in April to align with national guidance and NWL plans for the delivery of a paperless system. New priorities are developing plans for self-care as well as clinical decision support tools.

E2. Creating the Workforce for the Future

Work is underway to develop plans and priorities to address challenges at a NWL STP level, as well as locally, with particular recognition of workforce recruitment issues in the Heathrow area.

E3. Delivering our Strategic Estates Priorities

Separate reports are included in parts 1&2 setting out progress in developing the North of Hillingdon and the Uxbridge and West Drayton hubs together with issues regarding GP provision at Yiewsley, Hayes and Heathrow Villages.

E4. Delivery of our Statutory Targets

Hillingdon has a robust performance management structure in place that is delivering updated demand modelling as part of 18/19 operational planning.

E5. Medicines optimisation

Hillingdon has an existing and ongoing annually updated programme to assure medicines optimisation including focus on similar or identical medicines, reduce wastage and inappropriate use of antibiotics, as well as the Choosing Wisely programme, e.g. the campaign that is focused on avoiding unnecessary medical tests, treatments and procedures

E6. Redefining the Provider Market

The ACP, known as Hillingdon Health and Care Partners (HHCP), is the CCG's preferred delivery vehicle for integrated care and reflects the national policy direction for establishing accountable care organisations as set out in the Next Steps on the Five Year Forward View (NHSE March 2017). HHCP is about to move into its operational phase (from April 2018). The Council continues to work with HHCP through their joint board and at an operational level to help shape the business plan, financial modelling and the model of care.

The sustainability of the local care market is an issue that cuts across all others referred to in this report. The issues are about ensuring a supply of quality providers to meet the care and support needs of residents and to also give them choice. Some key actions being taken to address this are included within the BCF plan, e.g. integrated homecare and care home development and the work being done to support care homes. The exploration of partnership working opportunities to support the care workforce is also critical to supporting the sustainability of care market.

Financial Implications

There are no direct financial costs arising from the recommendations in this report.

4. EFFECT ON RESIDENTS, SERVICE USERS & COMMUNITIES

What will be the effect of the recommendations?

The framework proposed will enable the Board to drive forwards its leadership of health and wellbeing in Hillingdon.

Consultation Carried Out or Required

None.

Policy Overview Committee comments

None at this stage.

5. CORPORATE IMPLICATIONS

Hillingdon Council Corporate Finance comments

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

Hillingdon Council Legal comments

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