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Date: 18 November 2014

Dear Member

HEALTH AND WELLBEING BOARD - WEDNESDAY, 19 NOVEMBER 2014

I am now able to enclose, for consideration at next Wednesday, 19 November 2014 meeting of the Health and Wellbeing Board, the following update report from the West Kent Local Health and Wellbeing Board which was unavailable when the agenda was printed.

Agenda No	Item
12	**Promoting and Delivering the Kent Joint Health and Wellbeing Strategy - Progress reports from local Health and Wellbeing Boards (Pages 3 - 24)**

To note the reports of the local health and wellbeing boards

Yours sincerely

Peter Sass
Head of Democratic Services

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This report identifies the strands of each element of the Kent Health and Wellbeing strategy and then attempts to describe which Commissioning Body is responsible for each strand. The advantage of this approach is that it keeps the focus on the strategy rather than on the various provisions that are being made as a result of each commissioner's plans. The disadvantage is that there is as yet incomplete mapping of strategic need to effective services, although some outcomes are now being measured at CCG HWB level. Dashboards to display this mapping need further refinement comprehensively to demonstrate where services are adequate or not.
A particular concern for HWBs is where many commissioners have a role, for example in childhood obesity. There is a risk that by being everyone's problem, a subject such as childhood obesity will not be strongly led , commissioned or delivered.

Every child has the best start in life

Subject	CCG	PH	NHSE	KCC	Districts and Boroughs
Maternal smoking		√			
Breast feeding rates		√			√
Increasing physical activity rates					√
Childhood Obesity	√	√	√	√	√
CAMHS service access and quality	√				
Access to Childcare				√	√
Speech and Language services	√				
Community based services	√			√	

Effective prevention of ill health by people taking greater responsibility for their health and wellbeing

Subject	CCG	PH	NHSE	KCC	Districts and Boroughs
Reducing the proportion of adults with excess weight		√			√
Increasing the number of NHS Health Checks		√			
Communities conducive to Health and Wellbeing including work, housing and leisure					√
Equality of access and provision for people with learning difficulties	√		√	√	√
Identifying and treating individuals in the gap between observed and predicted prevalence	√	√	√		

The quality of life for people with long term conditions is enhanced and they have access to good quality care and support.

Subject	CCG	PH	NHSE	KCC	Districts and Boroughs
Increased identification of and support for people with learning difficulties to live independently	•			•	
Earlier diagnosis of diabetes	•		•		
Reduced number of falls and thus hip fractures	•				•
Helping older people to live at home longer	•		•	•	•
Improving self care and citizens ability to access services directly	•	•	•	•	•
Improved capacity and capability of out of hospital services	•		•	•	•

People with mental ill health issues are supported to “live well”

Subject	CCG	PH	NHSE	KCC	Districts and Boroughs
IAPT	•				
Drugs and Alcohol services		•			
Re-ablement of people with mental illness				•	•
Reductions in social isolation and loneliness					•
Improvement of resilience for residents of vulnerable communities					•
Improved access to services for vulnerable groups	•	•	•	•	•
Improve provision as patients move from child/adolescent to adult mental health services	•				
Increase rates of recovery in primary	•		•		

care					
Places of safety	•			•	

People with dementia are assessed and treated earlier and are supported to "live well"

Subject	CCG	PH	NHSE	KCC	Districts and Boroughs
Increase rates of diagnosis to be closer to predicted prevalence rates, including groups at high risk	•		•		
Upskill the workforce	•		•	•	
Make services easier for people with dementia to use	•	•	•	•	•
Make communities easier for people with dementia to live in				•	•
Improved system response for patients with dementia who are in crisis	•			•	
Improve carer support	•		•	•	

NHS
West Kent
Clinical Commissioning Group

Responding to the Joint Kent Health and Well-being Strategy

19 November 2014

Patient focused, providing quality, improving outcomes

1 Background

Introduction

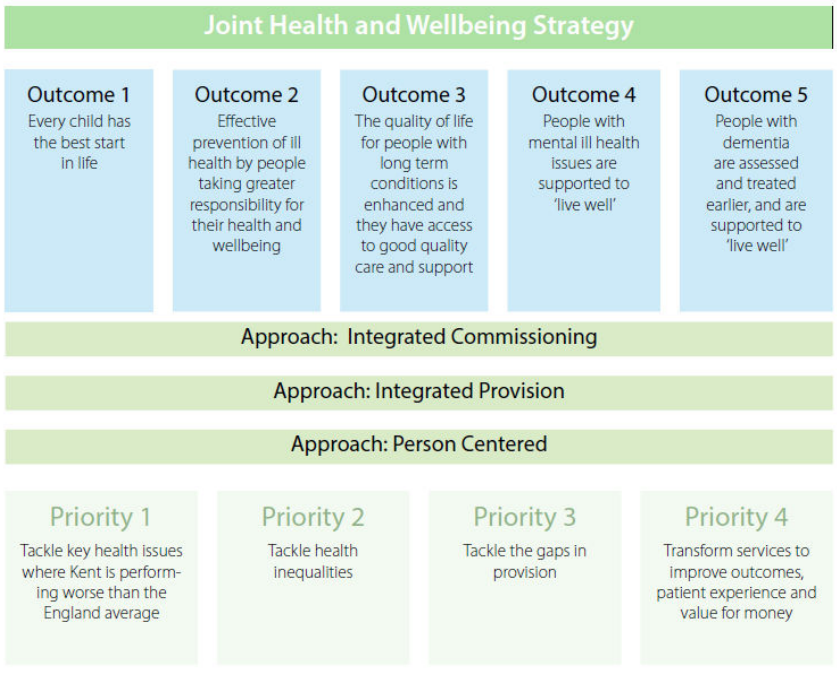
1.1.1 The aim of this paper is to demonstrate how NHS West Kent CCG responds the priorities, approaches and outcomes of the Kent Joint Health and Wellbeing Strategy and provide an update on the commissioning intentions/actions that are being taken forward.

1.1.2 The Kent Joint Health and Wellbeing Strategy is published by the Kent Health and Wellbeing Board on behalf of all local authorities and NHS Clinical Commissioning Groups in Kent.

1.1.3 The Kent Joint Health and Well-being Strategy 2014-2017 sets out the overarching direction for the NHS, social care and public health services in Kent. It also describes how we would like to work together to improve people's health and reduce the health inequalities that exist in the county. We have updated the strategy and want to hear how you would like to be involved in future engagement activity around the strategy.

1.1.4 The Kent Health and Well-being Board (KHWB) was established in April 2013, and at that time it agreed its first Health and Well-Being strategy drawing on the information contained in the Joint Strategic Needs Assessment (JSNA). This strategy helped inform and shape the Strategic Commissioning Plan 2014-2019 and the Better Care Fund submission for NHS West Kent CCG.

1.1.5 During 2014 the Kent Joint Health and Well-being Strategy (KJHWBS) was refreshed along with the JSNA and as the major challenges facing Kent were considered to be still applicable the same set of 5 outcomes and 4 priorities were retained in the updated strategy. It was also agreed that three approaches will be used to test all future developments to ensure they are Person Centred, that they part of Integrated Provision and procured by Integrated Commissioning.



2 Aligning Plans

2.1.1 The NHS West Kent CCGs Strategic Commissioning Plan 2014-2019 was informed by the same JSNA that was used to inform the KJHWBS

2.1.2 An underpinning theme of the Kent Joint Health and Well-Being Strategy (KJHWBS) relates to the growing pressure of demographic change, generating increased need for health and social care services at a time of financial stringency echoes the challenges that underpins Mapping the Future the blueprint for change in west Kent

2.1.3 The following table shows how the key commissioning intentions in the 2014-2019 Strategic Commissioning Plan align to the 5 outcomes of the KJHWBS. More detail can be foundin Appendix I.

OUTCOME 1: Every child has the best start in life
Extract from the Kent Joint Health and Well-Being Strategy: *"The aim is to provide additional local services that can be accesses easily, at the right time and in the right place. This will ensure more targeted early help is available to meet the needs of children and young people in a way that avoids problems becoming more serious. We also need to ensure that children and young people experience a seamless transition when they move between services".*
Highlighted Issues in KJHWBS • Speech and Language Therapy • Common Assessment Framework • Disabled Children • Child and Adult Mental Health Services
Summary of Key NHS West Kent CCG Commissioning Intentions 2014-19 • Maternity services • Looked After Children • Disabled Children - • Children's Urgent Care Pathway • Children's Community Nursing Model • Child and Adult Mental Health Services

OUTCOME 2: Effective prevention of ill health by people taking greater responsibility for their health and wellbeing
Extract from the Kent Joint Health and Well-Being Strategy: *"To improve people's long term health we have to improve lifestyles, encourage healthy eating in adults and reduce levels of smoking. In addition to this we will need to look at how we improve people's knowledge of the symptoms of various diseases such as cancer and what they can do prevent them, for example by encouraging physical activity. …….. Addressing health inequalities will require all partners to effectively contribute to improving access to services so that overall health equity can be improved".*
Highlighted issues in KJHWBS • Early screening • Interventions targeted to small populations of high risk groups • Whole population approaches that encourage citizens to take amore active part in the immediate and long term health and wellbeing • Using information across the system to understand the need of our local population
Summary of Key NHS West Kent CCG Commissioning Intentions 2014-19

- Premature Death
- New Primary Care Model
- Medicines Optimisation in Primary Care
- Expert patients program

OUTCOME 3: The quality of life for people with long term conditions is enhanced and they have access to good quality care and support
Extract from the Kent Joint Health and Well-Being Strategy: *"To improve outcomes for our population we need to shift our focus from treating individual illnesses to addressing the needs of the person as a whole. This requires rethinking how care is commissioned and provided. There is a widespread agreement across the health and social care system that things need to change and that an integrated approach to care is needed is we are to meet this challenge".*
Highlighted issues in KJHWBS • Management of long term conditions • Support for 75 and over that those with complex health and social care needs. • Falls • Workforce and skills issues • Learning difficulties
Summary of Key NHS West Kent CCG Commissioning Intentions 2014-19 • Falls Prevention Service • End of Life Care • Diabetes • Learning Disabilities

OUTCOME 4: People with mental health issues are supported to 'live well'
Extract from the Kent Joint Health and Well-Being Strategy: *"Mental Health covers many separate conditions that vary in duration and severity…….. Mental illness can co-occur with learning/physical disability and substance misuse. Also people with physical health problems can experience emotional consequences of their condition…… Therefore health and mental health are not separate issues and both need to be treated with equal esteem".*
Highlighted Issues in KJHWBS • Young people transitioning from child to adult services • Reviewing medication and signposting effectively • Raise awareness of mental health
Summary of key NHS West Kent CCG Commissioning Intentions 2014-19 • Mental health placements • Carers • Crisis Care • Eating Disorders • Primary Care Mental Health • Improving Access to Psychological Therapies

OUTCOME 5: People with dementia are assessed and treated earlier, and are supported to live well
Extract from the Kent Joint Health and Well-Being Strategy: "We Will support people to live well with dementia and do all we can to ensure that people who need help and support receive it al the right time, in the right place and the right way for them…….. We must develop more closely integrated services, more holistic forms fo care and support a greater awareness and understanding of the needs and aspirations of people with dementia and those close to them, such as their families, friends and carers".

Highlighted issues in KJHWBS • Improving access to diagnosis • Integrated approach to care planning • Training and upskilling the workforce • Dementia friendly environments
Summary of Key NHS West Kent CCG Commissioning Intentions 2014-19 • Dementia • Care plan management system

Louise Matthews, Deputy Chief Operating Officer, West Kent Clinical Commissioning Group, ✉ louise.matthews5@nhs.net ☎ 07903271819

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Maidstone Health and Wellbeing Board
Update as at 30 October 2014

Local health and wellbeing boards be tasked to report in November 2014 on how local populations are being engaged in discussions concerning the implementation of the Health and Wellbeing strategy in their local areas.

Maidstone's Health and Wellbeing Board ensures effective local engagement on health and wellbeing issues, using existing engagement mechanisms where necessary and linking in to the county level engagement work where established. Our local approach seeks to enhance how partners communicate the Health and Wellbeing Strategy, engaging with residents, local businesses and staff. Our local engagement channels include;

Social Media: Promoting key messages on partner Facebook and Twitter pages.
Websites: Promoting key messages, consultations and commissioning opportunities through partner websites.
Member engagement: Provision of Borough Council member training and the relevant Overview and Scrutiny Committee.
Communications: Utilising Maidstone Borough Council's Borough Update magazine and Community Development newsletter.
Engagement: Utilising engagement initiatives with partners which demonstrate a commitment to the Health and Wellbeing agenda and promote local services. A range of methods have been used, including partnership engagement through meetings, promoting consultations, resident engagement through neighbourhood action planning, health checks, community health days, budget road shows and ward walks.

Maidstone Health and Wellbeing Board has engaged with the sub-group set up to deliver the Communications and Engagement programme supporting the Kent Joint Health and Wellbeing Strategy and JSNA Steering Group to look at opportunities for joint working with all Kent-based districts to ensure consistency and targeted messages.

Local health and wellbeing boards be required to ensure local plans demonstrate how the priorities, approaches and outcomes of the Kent Joint Health and Wellbeing Strategy will be implemented at local levels and report this assurance to the Kent Health and Wellbeing Board in November 2014.

Maidstone's Health and Wellbeing group provides a forum in which the member bodies can work together to plan services and programmes in relation to the targets and objectives outlined under its remit in the Kent Joint Health and Wellbeing Strategy, Maidstone Community Strategy, Maidstone Borough Council's Community Development Strategy and Health Inequalities Action Plan.

The Maidstone Health and Wellbeing Board is co-chaired by the Borough Council's Chief Executive and Leader to maintain strategic leadership and influence to build on the priorities of the Kent Joint Health and Wellbeing Strategy, supporting initiatives which encourage Maidstone borough residents to take responsibility for their own health and support resilient communities through improved social connections within the community.

Our local board has used county's Strategy as a set of core values and outcomes by which to design our sub-groups, embed consistency and support our local priorities and actions for improvement in which to understand the health and wellbeing needs of the local community.

The Maidstone Health and Wellbeing Board supports many of the outcomes of the Kent Joint Strategic Needs Assessment (JSNA), setting up three local sub-groups consisting of members from the public, private, voluntary and community sector.

Kent Joint HWB/JSNA outcomes	**Maidstone HWB sub-group**	**Sub-Group Actions**
Every child has the best start in life	**Children**	• Support to increase breastfeeding rates • Encourage access to health services for all • Promote healthy weight for children • Increase physical activity
Effective prevention of ill health by people taking greater responsibility for their health and wellbeing	**Social Justice** **Employment and Skills**	• Reduce risk taking behaviours (e.g. teenage pregnancy, young people's sexual health, adult high risk drinking, smoking) • Promote opportunities to support people out of poverty • Increase proportion of young people (up to 24) in full time education or employment • Support business to have healthy workplaces
People with mental health issues are supported to 'live well'	**Social Justice**	• Improve partnership work to support good mental health • Support training to all front line workers to effectively support their customers who are mentally ill or at risk of relapse or becoming unwell in a safe effective way.
People with dementia are assessed and treated	**Social Justice**	• Support older people to live safe, independent

earlier, and are supported to live well		and fulfilled lives • Reduce social isolation

The sub-groups are supported by Kent Public Health, the local authority, businesses and local voluntary and community groups aimed at utilising existing organisations to support new opportunities to improve health and wellbeing locally and commissioning services in alignment with wider commissioning intentions. Opportunities with the Borough Council's Planning, Housing and Economic Development teams will be sought, alongside key partners including social housing providers, Jobcentre Plus, Kent Police and Kent Fire and Rescue Service.

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Local health and wellbeing boards be tasked to report in November 2014 on how local populations are being engaged in discussions concerning the implementation of the Health and Wellbeing strategy in their local areas;

Tunbridge Wells' Borough Council is committed to engaging local communities, businesses, officers and VCS in conversations concerning the implementation of the JHWBS for Kent. This achieved through utilising existing tools and resources including:

•**Communications:** Dissemination of important messages via Tunbridge Wells' Local Magazine and Healthy Weight Team Newsletter – this may include publicising community consultations or promoting new strategies and campaigns.

•**Social Media:** Promoting key messages on Facebook and Twitter pages.

•Tunbridge Wells Borough Council Website: promoting health initiatives and campaigns via our website and links to other relevant health sites/ minutes/ consultations and documents via the website

•**Member engagement:** Housing and health officers working closely with portfolio holder for housing and health. Providing information to members and OSC.

•**Tunbridge Wells Health Action Team:** Dissemination of important information, such as consultations to key partners/ stakeholders via the Health Action Team meetings and regular email updates.

•**Engagement:** Utilising engagement initiatives with partners which demonstrate a commitment to the Health and Wellbeing agenda and promoting local services. A range of methods have been used, including, resident engagement through social prescribing in Sherwood through the Sherwood partnership, health checks and community health days.

•**PPGs and GP surgeries:** We have good links with post of the GPs and some for the PPGs so information regarding consultations and important documents is also shared via these mechanisms.

Tunbridge Wells Borough Council

Local health and wellbeing boards be required to ensure local plans demonstrate how the priorities, approaches and outcomes of the Kent Joint Health and Wellbeing Strategy will be implemented at local levels and report this assurance to the Kent Health and Wellbeing Board in November 2014

Outcome 1: Every child has the best start in life

Priority 1

- the number of pregnant women who smoke at time of delivery
- breast feeding initiation rates
- breast feeding continuance at 6-8 weeks
- the proportion of 4-5 year olds with excess weight
- the proportion of 10-11 year olds with excess weight

Priority 2

Tackle health inequalities:

- Implementing the infant feeding action plan (partnership working).
- Children's healthy weight services in priority areas
- Smoking in pregnancy by strengthening resources/ whole systems approach
- Mindful of vulnerable and disadvantaged groups

Priority 3

Tackle the gaps in service Provision achieved through partnership working, monitoring and evaluation of services and the initiation of Task and Finish Groups with recommendations to the commissioners. Community consultations and common assessment framework.

Priority 4

Transform services to improve outcomes, patient and value for money achieved through patient feedback exercises and economic impact assessments.

Local Authority's Actions to support outcome 1

The following are targeted in our most deprived wards to support improvement in health outcomes for the poorest fastest:

- A range of campaigns & health events to raise awareness of the importance of breast feeding (working closely with PSB)
- Work with local businesses and workplaces to encourage and promote breast feeding (Kent Healthy Business Awards and environmental health roll out to food premises)
- Support the baby be clear scheme by working with KCHT SSS.
- Kent healthy business awards – providing safe spaces in the workplace for women to breastfeed
- Little Stirrers Programme delivered for under 5's in children's centres
- Cook and Eat Programme delivered in schools for 7-11 year olds
- LEAP programme delivered in school for 7-11 year olds
- Healthy eating lessons and events delivered in schools
- Healthy mums, healthy bumps programme delivered in partnership with midwives
- Troubled Families Programme – team around the whole family to support with issues including health, emotional wellbeing, ASB and school attendance.
- Linking to the Emotional Health and Wellbeing Strategy (0-25)
- Statutory Duty to carrying out assessments for the Housing Hazard Health and Safety Rating, which will identify the safety of the child's home.
- Areas of green/ open space are allocated and protect through the local plan.
- The development of parks and recreational space is supported through planning applications.
- All new development links in existing and new footpaths and cycle ways – sustainable and active transport

Implementation of the health and wellbeing strategy continued

Outcome 2: Effective prevention of ill health by people taking greater responsibility for their health and wellbeing

Priority 1

- the proportion of adults with excess weight
- the take up of NHS health checks

Priority 2

Tackle health inequalities

- Whole population approaches
- Effective screening –early identification
- Targeted at small populations of high risk groups

Priority 3

Tackle the gaps in service Provision achieved through partnership working (county, CCG level and local HWB) monitoring and evaluation of services and the initiation of Task and Finish Groups with recommendations to the commissioners. Community consultations. Monitored through the Mind The Gap plan imbedded within local health action team.

Priority 4

Transform services to improve outcomes, patient and value for money achieved through patient feedback exercises and economic impact assessments.

Local Authority's Actions to support Outcome 2

The following are delivered by our health team in community settings with a particular focus on deprived areas

- Weight It programme – 10 week healthy weight course
- Exercise Referral – 10 weeks of physical activity
- Move Eat Grow Programme for people with learning disabilities
- Community Conservation and Volunteering - PA
- Delivery of NHS Health Checks
- Healthy Mums, Healthy Bumps course
- Support a reduction in the number of smokers
    - Referrals to KCHT SSS,
    - Organisation and delivery of health events in partnership with KCHT SSS
    - Support for campaigns such as stoptober
    - Delivery of the Kent Healthy Business Awards – theme on smoking
    - Smoke free policy
    - TW has also made a commitment to increasing referrals by promoting smoking cessation clinics in place of paying a FPN for dropping cigarette butts.
- Man up, Shape up – Exclusively for men weight management group

The following are co-ordinated through the CSU with a focus on reducing alcohol related hospital admissions:

- Safe Socialising policy
- Late Night Levy
- KCAP – challenging underage sales
- Public Spaces Protection Orders (still under consultation) to include drinking in public spaces
- Best Bar None Safer Socialising Award
- Winter shelter funded by the CSU and delivered via Churches together
- Sherwood partnership and social prescribing
- Council's Green infrastructure plan

Implementation of the health and wellbeing strategy continued

Outcome 3: The quality of life for people with long term conditions is enhanced and they have access to good quality care and support

Priority 1

•□ the percentage of adults with a learning disability known to the LA, who are recorded as living independently or with family

•□ in early identification of diabetes

•□The number of hip fractures for people aged 65+

Priority 2

Tackle health inequalities

•Support older people to live safe, independent and fulfilled lives and support disabled people to live independently at home

•Support self-management of long term conditions

•Deliver effective local services for falls, falls prevention and fractures and □ the incidence of fractures of people aged 65+

•Support people with Learning disabilities with housing, employment, access to health services and leisure activities.

Priority 3

Tackle the gaps in service Provision achieved through monitoring and evaluation of services and the initiation of Task and Finish Groups with recommendations to the commissioners. Community consultations. Monitored through the Mind The Gap plan imbedded with local health action team.

Priority 4

Transform services to improve outcomes, patient and value for money achieved through patient feedback exercises and economic impact assessments.

Local Authority's Actions to support Outcome 3

•Monthly tea dances for older persons to encourage flexibility and physical activity.

•Working in partnership with the Good Neighbour Project who run falls prevention/ postural stability classes in Tunbridge's Wells.

•Tailored Weight Management programme; Move, Eat, Grow delivered as a close group for people with learning disabilities

•**Winter Warmth Programme – Excess winter deaths is one of only two indicators where TW is performing worse than the England average; therefore this is one of our Key Priorities.**

•Community Wardens carry out wellbeing assessments for the elderly

•Incidence of falls included within the Mind The Gap Plan

•Move Eat Grow Weight Management Programme exclusively for people with learning disabilities

•Disable Facilities Grants

•Falls referral pathway delivered via housing teams

•Handy Person Services

•Register of properties that have been adapted with disabled facilities

•Assistance, help and signposting where persons aren't eligible for a grant.

Implementation of the health and wellbeing strategy continued

Outcome 4: People with Mental Ill Health issues are supported to Live Well

Priority 1

•□ in the % of people using adult social care services having as much social contact as they would like according the Adult Social Care Users Survey

•□ in the % of adult carers who have as much contact as they would like according to the ASCUS.

•□ in the % of respondents who, according to the survey, are satisfied with their life, who are not feeling anxious, and who feel their life is worthwhile.

Priority 2

Tackle health inequalities

•.Suicide reduction strategy

•Equity of access for all

•Understanding local needs

•Engaging people in their own care

•Improve opportunities for returning to employment

•Promoting programmes to improve resilience and recovery

•Targeting vulnerable groups

Priority 3

Tackle the gaps in service Provision achieved through monitoring and evaluation of services and the initiation of Task and Finish Groups with recommendations to the commissioners. Community consultations. Monitored through the Mind The Gap plan imbedded with local health action team.

Priority 4

Transform services to improve outcomes, patient and value for money achieved through patient feedback exercises and economic impact assessments.

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Local Authority's Actions to support Outcome 4

•Delivery of the 9 week Headspace and Jasmine Programmes for people with moderate mental health and wellbeing issues. In partnership with MIND.

•Exercise Referral for people with mental health conditions

•Event for World Mental Health Day

•Signposting and events to promote the live it well website and the six ways to wellbeing to improve emotional resilience.

•Monthly Tea dances to reduce social isolation for older people

•SAFE – youth led project delivered in schools to raise awareness of mental health and suicide.

•DAVSS - support for male and female victims experiencing domestic abuse; funded by KCC public health and CSU

•Community Liaison Officer of the CSU makes referrals to mental health services

•KHWP- community conservation and volunteering to improve mental health through green exercise and social interaction

•Working in partnership with DPG and TWMHRC

•Men's shed (awaiting grant and project proposal approval)

•Linking with and supporting the time to change campaign

•Brief assessments and advice related to alcohol – promotion of alcohol support services through our programmes and WellPoint machine

Implementation of the health and wellbeing strategy continued

Outcome 5: people with dementia are assessed and treated earlier and are supported to 'live well'

Priority 1

Working with partners to improve early diagnosis

Priority 2

Tackle health inequalities – prioritising assessment for high risk groups

- Patients 60+ with CVD, stroke, peripheral vascular disease or diabetes
- Patients 40+ with downs syndrome
- Other patients 50+ with LD
- Patients with long term neurological conditions

Priority 3

Tackle the gaps in service Provision achieved through monitoring and evaluation of services and the initiation of Task and Finish Groups with recommendations to the commissioners. Community consultations. Monitored through the Mind The Gap plan imbedded with local health action team.

Priority 4

Transform services to improve outcomes, patient and value for money achieved through patient feedback exercises and economic impact assessments.

Local Authority's Actions to support Outcome 5:

- Delivery of NHS health checks to identify the risk factors of cardiovascular disease early
- Supporting development of dementia friendly communities through events, customer consultation exercises and attending West Kent and TW dementia forums.
- Promoting the dementia helpline and dementia friendly Kent web
- Commitment to identify front line staff who will become dementia champions.