

From: Andrew Scott-Clark, Director of Public Health

To: Graham Gibbens, Cabinet Member for Adult Social Care and Public Health

Subject: **Adult Lifestyle Transformation - Living Well/Ageing Well Services for Smoking Cessation, Health Trainers, Healthy Weight and NHS Health Checks**

Classification: Unrestricted

Past Pathway of Paper: Adult Social Care and Health Cabinet Committee:
1 May 2015, 10 July 2015, 14 January 2016, 10 March 2016, 12 July 2016 AND 6 December 2016

Future Pathway of Paper: Cabinet Member decision – 16/00046 (3)

Electoral Division: All

Summary:

This report provides an update on the transformation programme for Adult Lifestyle Services and NHS Health Checks. The Public Health team has continued engagement with a range of stakeholders, exploring a wide number of options for integration and alignment.

Since the start of the project there have been a number of strategic developments which have resulted in the need to reflect on the best way to procure these services. Significantly, this includes the development of the NHS Sustainability and Transformation Plan (STP) with a key work stream on prevention.

There is a clear need for a flexible route to market which adapts to emerging needs, allows for local variation, and maximises opportunities for integration. This does not change the support to move to an integrated lifestyle service, which will combine a number of existing services to offer holistic support that encourages greater personal responsibility.

Recommendations: The Cabinet Member for Adult Social Care and Public Health Committee is asked to:

1. Take the decision to change the service delivery for individual lifestyle services into an integrated lifestyle service called One You Kent.
2. Take the decision to extend the current contracts for healthy lifestyle services until 30 September 2017, to take account of emerging changes in health and social care system.

1. Introduction

- 1.1. This paper provides an update on the work to transform our approach to delivering Healthy Lifestyle Services and the NHS Health Checks service. The outcomes of these services include improved healthy weight, supporting people

to stop smoking, earlier support in relation to mental health, and earlier intervention in relation to alcohol misuse.

- 1.2. Previous papers have set out clear support for a new integrated model of provision. This includes results from the Public Consultation¹ and also insight work undertaken with key target groups. The programme also reviewed the evidence base for reducing health inequalities. The proposed model therefore integrates current lifestyle services to provide holistic support, reducing the need for an individual to visit multiple services.
- 1.3. This programme of work has a good evidence base. However there is clear room for innovation and a need to shift the focus in lifestyle services from a service based approach, to one that better utilises community resource and fosters personal responsibility.
- 1.4. Since this transformation programme began, there have been a number of strategic developments which must now also be taken into consideration. This includes the development and recent sign off of the Kent and Medway Sustainability and Transformation Plan (STP). The STP will be connected to significant change over the next five years, especially for NHS and KCC Social Care partners, and prevention and adult health improvement is a central part of this plan.
- 1.5. The plan supports KCC's intention to ensure improvement in the lifestyle services that it commissions, and also to implement the integrated approach. However, it is also now critical to ensure that any new service is aligned with the priorities and approach within the STP.

2. A Changing Landscape

- 2.1 The draft STP for Kent and Medway was published on the 23rd November 2016. This plan provides a clear framework for dealing with the current challenges facing the NHS relating to rising demand and improving the quality of care, within the financial envelope available. The plan sets out a number of priorities including a new prevention work stream. Clearly, this work stream will need to align with the proposed integrated healthy lifestyle service commissioned by public health.
- 2.2 The STP sets out that it will enlist public services, employers, and the public to support health and wellbeing, in particular to tackle the burden of cardiovascular disease and diabetes. The plan includes in its prevention work stream 4 priorities including:
 - Obesity and Physical activity, delivering an almost fivefold increase in capacity in tier 2 weight management programmes
 - Tailored smoking cessation services including for young people, pregnant smokers and people with mental health conditions
 - Workplace health, working with employers on lifestyle interventions
 - Reducing alcohol related harm in the population.

¹75% of respondents from the Public Consultation agreeing with the proposed model, and only 9% who disagreed.

- 2.3 These initiatives have the potential to drive significant improvements in adult health and wellbeing and must be properly aligned with the new KCC commissioned integrated healthy lifestyles service in the most efficient way. This is a welcome development, outlining that prevention must be the responsibility of a whole system, rather than relying on relatively small commissioned services.
- 2.4 In addition the shape of the providers of NHS services is changing. Multispecialty Community Providers (MCPs) are developing in a number of areas of the county and are a key part of the STP as part of the Local Care work stream. These structures are at different stages of readiness across Kent, but will all look to provide proactive, coordinated and responsive person centred care. The new integrated lifestyle services will need to effectively align to these structures as they develop. There is a clear opportunity for improving the efficiency and effectiveness of the NHS Health Checks programme which is predominately delivered through Primary Care as part of these arrangements.
- 2.5 There are currently a number of contracting arrangements being developed across Clinical Commissioning Groups which are linked to the STP and the development of the new models of care. These arrangements may vary across different localities in Kent and will provide a further opportunity for alignment and integration.
- 2.6 There is also a collaborative approach is also in development with District and Borough Councils to maximise opportunities highlighted in the King's Fund report² setting out the important role district councils play in improving public health. The new approach developing with all districts across Kent will ensure a greater focus on the wider determinates of health, with the aim of helping to create healthy communities that promote long-term positive lifestyle choices.
- 2.7 All of the changes described above need to be fully aligned with the new model of provision commissioned by KCC.

3. Commissioning update

- 3.1. **The Model** - The new model is based on recognition that individuals have multiple unhealthy behaviours (smoking, alcohol, diet, obesity etc.) and the current system of separate specialist services may not be the most effective way of promoting behavioural change, especially in target groups. The new model will offer support which allows people to be assessed in a holistic way, and identifies the most appropriate steps and support to encourage healthier behaviours. Appendix 1 provides a visual representation.
- 3.2. **One You Kent** –The new service will provide a single service model to treat the individual. This will also be supported by a remodelled Public Health section of the KCC website, and an integrated campaign. This will start to build consistent One You messaging across the health and social care system and is in line with the strategic priority outlined in the Directorate business plan for 2016-17.

² Buck D and Dunn P (2015)

- 3.3. The model of provision has evolved throughout the engagement process which has involved more than 80 organisations from a range of sectors. Partners have developed a three stage pathway, focusing on stages to motivate change, make change, and maintain change, and the new service will be a core part of supporting people to make change
- 3.4. Market networking events and a supplier matrix has been used to support joint working between organisations. They have demonstrated a clear appetite for a wide range of organisations to deliver solutions. Market engagement emphasised the potential for smaller organisations to deliver innovation, choice, and efficiency and deliver outcomes with target groups. It will be important in any new model developed to actively link with the innovation that is available.

4. Procurement update

- 4.1. Previous papers advised of a procurement approach starting in the autumn of 2016. In line with the development of the STP, Public Health has been exploring the possibility for existing providers (KCHFT and District Councils) to work with KCC in a collaborative arrangement to drive forward change whilst the implementation of the STP evolves. In particular the development of the prevention work stream has significance for a final model, and the financial envelope available for the work.
- 4.2. It is therefore recommended that the current contracts for the healthy lifestyle services (Stop Smoking, Health Trainers, Healthy Weight and Health Checks) are extended for a six month period to allow the emerging changes to develop further, and to ensure that any procurement is complimentary to future developments of the health and social care system in Kent. However these contracts will be renegotiated to ensure delivery of the new integrated model from 1st April 2017.

5. Financial implications

- 5.1. As indicated in the previous papers, an efficiency target has been set to be delivered through the first year through use of technology, a more integrated and targeted model of delivery, and a shift from a service only response to one which encourages far better use of community resource.

6. Conclusions and next steps

- 6.1. The new STP has provided a great opportunity to develop a whole system approach to prevention. Any service that KCC commissions must link clearly to this whole system approach.
- 6.2. There is clearly overwhelming support from the public and stakeholders to move to an integrated model. Benefits include greater consistency, increased choice, ability to deliver efficiencies through utilisation of community resources and technology, simple patient pathway and increased scale through effective targeting of resources.
- 6.3. KCC will continue its programme of work to implement this new integrated model. It will do this initially with its current providers, working through the implementation of the STP, and report back to the Adult Social Care and Health Committee in May 2017 on next steps.

7. Recommendation(s)

The Cabinet Member for Adult Social Care and Public Health is asked to:

1. Take the decision to change the service delivery for individual lifestyle services into an integrated lifestyle service called One You Kent.
2. Take the decision to extend current contracts for healthy lifestyle services until 30 September 2017, to take account of emerging changes in health and social care system.

Background Documents

Buck D and Dunn P (2015). The district council contribution to public health: a time of challenge and opportunity. Available at https://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/district-council-contribution-to-public-health-nov15.pdf (accessed 03.11.2016)

Douglas G (2016) Transforming health and social care in Kent and Medway Sustainability and Transformation Plan 2016 Available at

Work in progress http://www.kent.gov.uk/__data/assets/pdf_file/0018/65205/The-STP-draft-plan.pdf (accessed 25.11.2016)

9. Contact details

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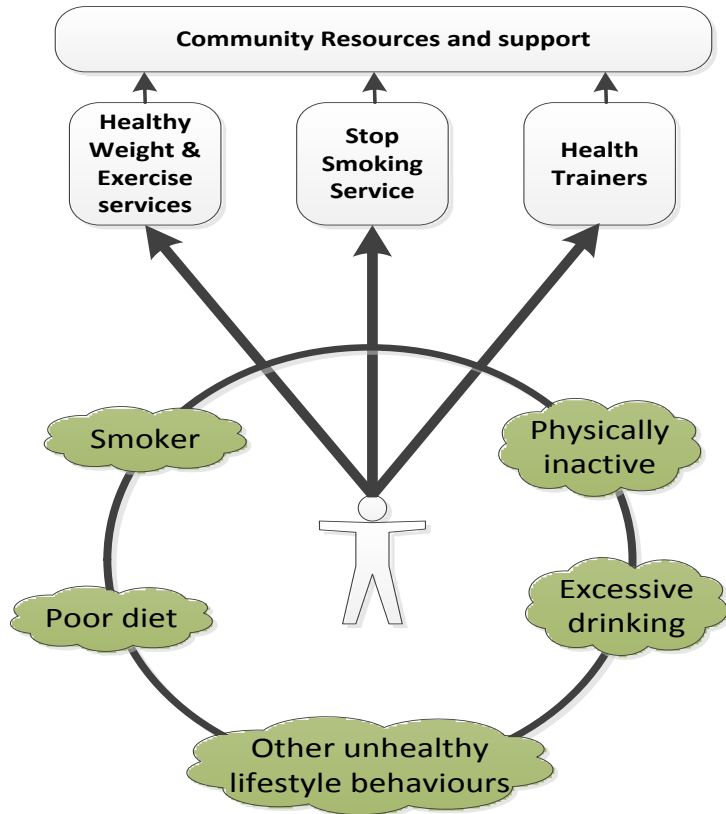
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Appendix 1

Existing model



Proposed model

