



HEALTH & WELLBEING BOARD ADDENDUM

4.00PM, TUESDAY, 14 NOVEMBER 2017

**COUNCIL CHAMBER, HOVE TOWN HALL, NORTON ROAD,
HOVE, BN3 3BQ**



ADDENDUM

ITEM	Page
36 FORMAL MEMBER INVOLVEMENT	1 - 2
37 CARING TOGETHER UPDATE	3 - 16



MEMBER INVOLVEMENT

WRITTEN QUESTIONS FROM MEMBERS OF THE BOARD

The following written questions have been received for the Health & Wellbeing Board meeting to be held on the 14 November 2017:

1. Question from Graham Bartlett

Universal Credit is set to be rolled out across the city shortly. As Chair of the Safeguarding Adults Board I am particularly concerned about those adults with care and support needs who may need additional help to deal with these changes. The Safeguarding Board were briefed and whilst there is some assurance that adults with care and support needs will be helped during this time, there remain concerns about the changes and potential safeguarding risks arising from this. We are committed to sharing our concerns with the Health and Wellbeing Board and ask if the Board feel that the city is ready to deal with these changes, especially for the most vulnerable.

2. Question from David Liley

Doctors of the World have recently produced a briefing which in summary states:

'The Government has made new regulations extending NHS charges to community healthcare services and placing a legal requirement for all hospital departments and all community health services to check every patient's paperwork, and charge upfront for healthcare, refusing non-urgent care where a patient cannot pay. Healthcare charges may be introduced for services provided by all community health organisations in England except GP surgeries. Organisations receiving NHS funding will also be legally required to make similar checks and possibly charge for services. A wide range of health services could be affected.'

Can the HWB give some clarity on which services locally will now be under these regulations and how these issues will impact on local residents?



Caring Together: Update

Dr. David Supple, CCG Clinical Chair
Rob Persey, Executive Director



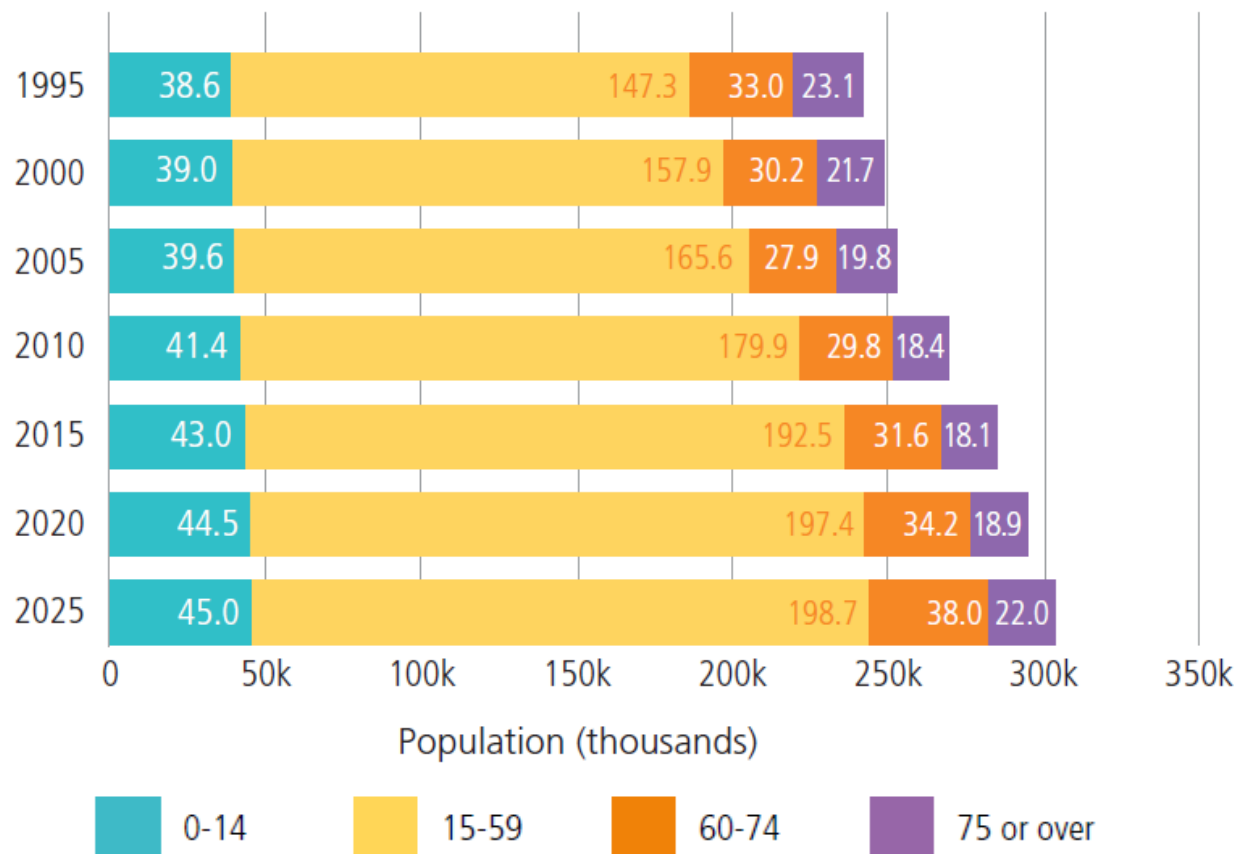
Content

- Joint Overview of Caring Together and Integration progress
- Highlight key health and social care challenges facing our city
- What does this mean in terms of demand
- How are we addressing this and how are we engaging with our residents and other stakeholders
- How are we managing the complex changes

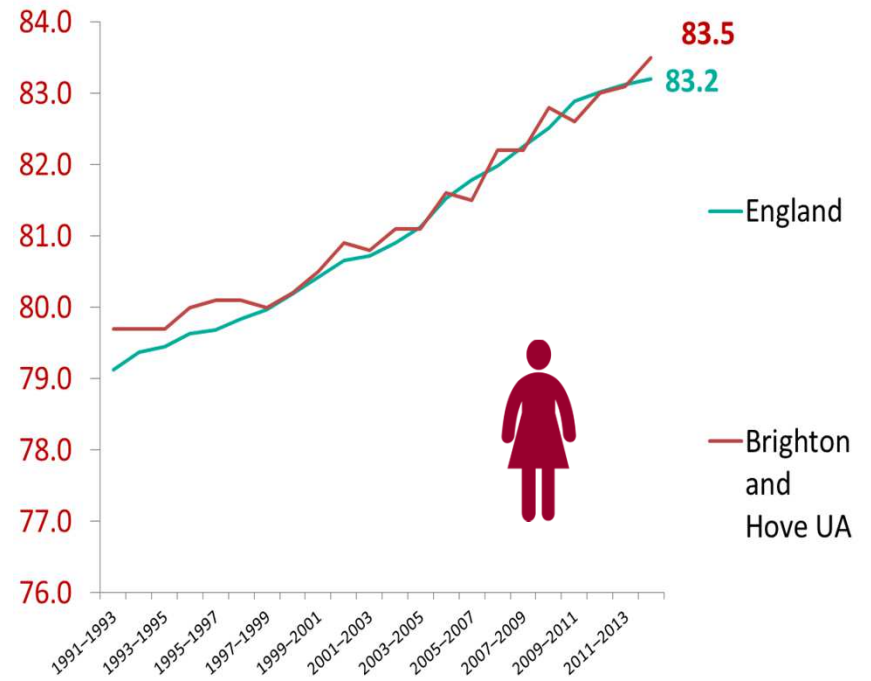
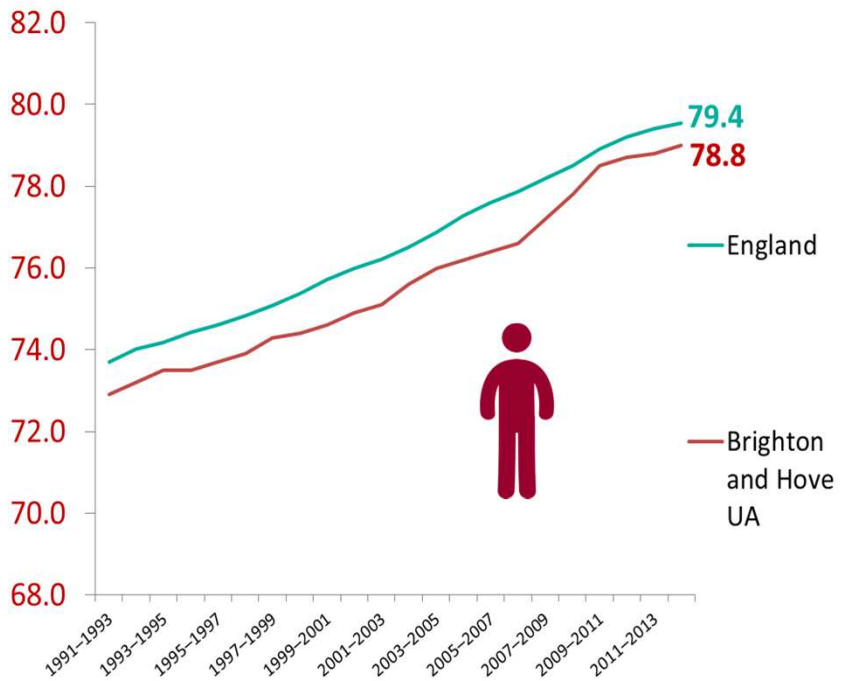


Our population is growing

Figure 1 Population (thousands) by broad age band, Brighton & Hove, 1995 to 2025



Our population is living longer



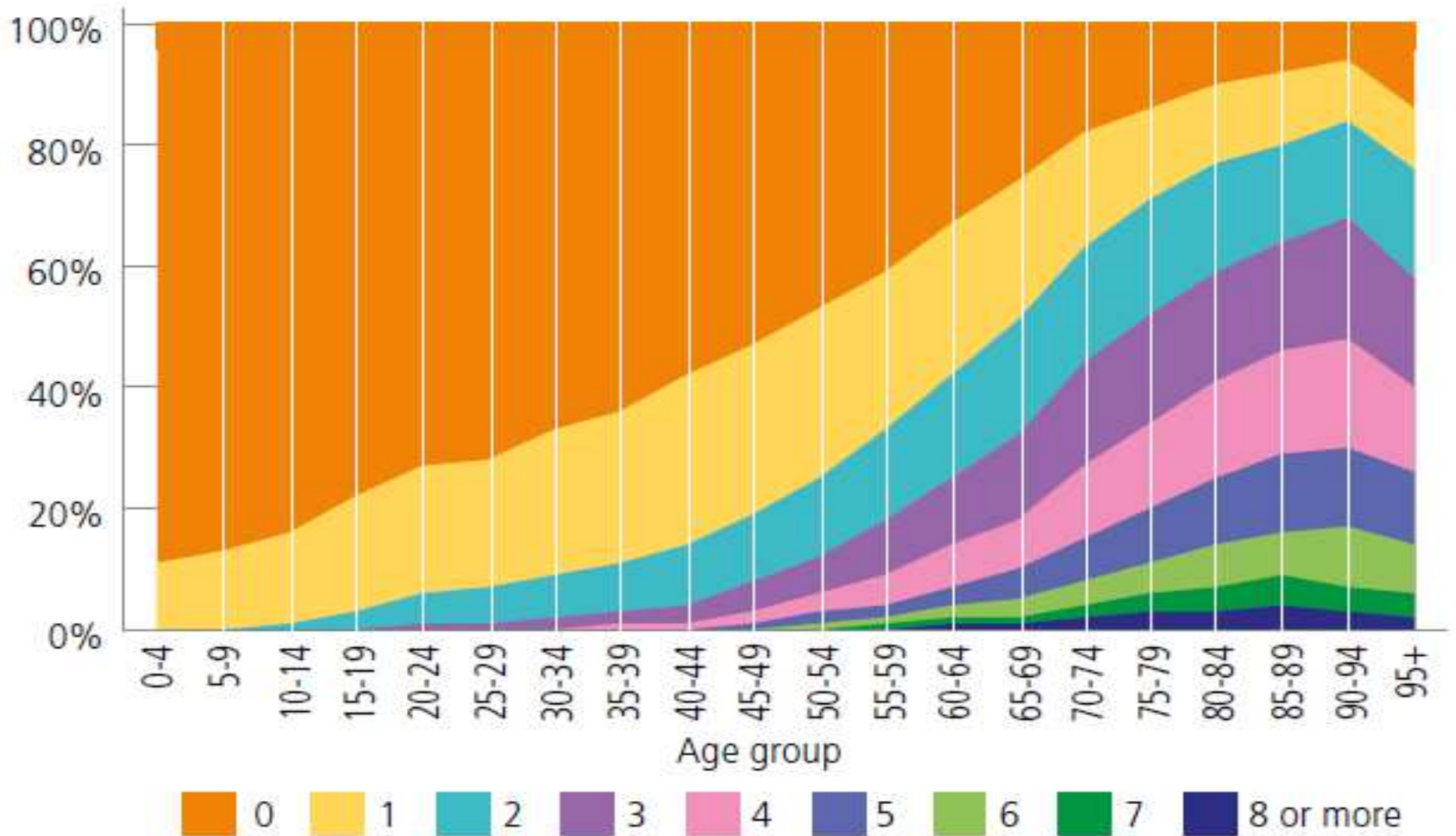
We are living longer but in ill-health - and health inequalities persist

- Between 2001/3 and 2013/15 life expectancy **increased** for males from 75 to 79 years and from 81 to 84 years for females.
- Between 2009/11 and 2013/15 healthy life expectancy **decreased** from 64 to 62 years for males and 64 to 61 for females.
- The healthy life expectancy gap between the most and least affluent local people is 14 years for males and 12.5 years for females.



The challenge of multi-morbidity:

Long term conditions by age Brighton & Hove 2017



Summary

- Demand is increasing
- Complexity is increasing
- Potential for cost to increase is significant
- Integration has the potential to help reduce and better manage demand
- Caring Together is a clinically driven programme to identify improved pathways and models of care
- Considerable future opportunity from further alignment, focussing now on first steps



Caring Together

Current position

- **The Care Programmes that are currently out for discussion are:**
 1. Preventative Services and Community Care.
 2. Planned Care and Cancer.
 3. Access to Urgent Care and Primary Care.
 4. Mental Health, Learning Disability, Children and Families.
 5. Medicines Optimisation.
 6. Primary Care Development.
- **The objective is to arrive at a system-wide agreement on the outcomes, benefits and timescales of these care programmes by 8 January 2018.**



Big Health & Care Conversation

- Continuing Big Health & Care Conversation communications and engagement during September 2017 and rolling until January 2018
- Significant amounts of engagement taken place, conversations included two open debates about STP and informal 'drop ins' for staff
- Big Health & Care Conversation evaluation report will come to the Health & Wellbeing Board in March 2018
- Our engagement will continue in 2018 building on data gained in the first phase



Caring Together / Integration

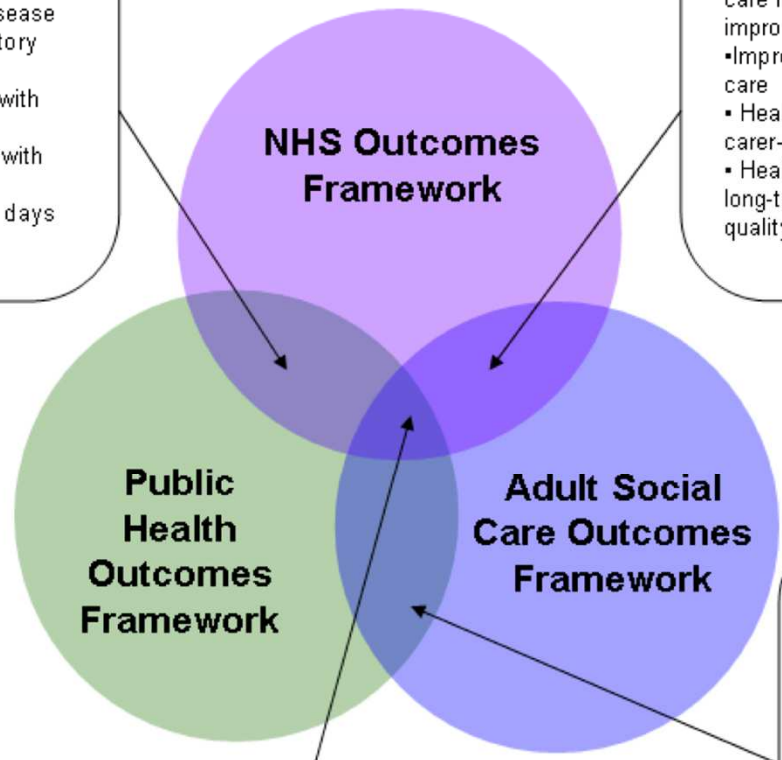
- Social Care and Health working together more closely
- Whole systems approach to managing demand
- Whole Systems Reporting group -more sophisticated analysis to understand demand across the whole Health and Care System
- Caring Together Outcomes Framework
 - overarching indicator set to track progress towards high level outcomes, evidence effectiveness of new ways of working and highlight areas requiring improvement.
 - Combines existing statutory frameworks and local transformation metrics



CURRENT SHARED OR COMPLEMENTARY* INDICATORS

- NHS & Public Health**
- Employment of people with long term conditions
 - Infant mortality
 - Under 75 mortality rate from all cardiovascular diseases
 - Under 75 mortality rate from cancer
 - Under 75 mortality rate from liver disease
 - Under 75 mortality rate from respiratory diseases
 - Excess under 75 mortality in adults with serious mental illness
 - Estimated diagnosis rate for people with dementia
 - Emergency re-admissions within 30 days of discharge from hospital
 - Amenable / preventable mortality*

- Adult Social Care & NHS**
- Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services
 - Dementia: effectiveness of post-diagnosis care in sustaining independence and improving quality of life
 - Improving people's experience of integrated care
 - Health-related quality of life for carers / carer-reported quality of life*
 - Health-related quality of life for people with long-term conditions / social-care related quality of life*



Key

- Unmarked indicators are shared - having shared responsibility between the named frameworks and the same indicator is included in each
- Indicators marked with a star are complementary - there are different measures in the named frameworks that look at the same issue

- NHS, Public Health & Adult Social Care**
- Employment of people with mental illness/those in contact with secondary mental health services*
 - Employment of people with a learning disability*

- Public Health & Adult Social Care**
- Adults with a learning disability who live in their own home or with their family
 - Adults in contact with secondary mental health services living independently with or without support
 - Social isolation
 - The proportion of people who use services who feel safe / older people's perception of community safety*



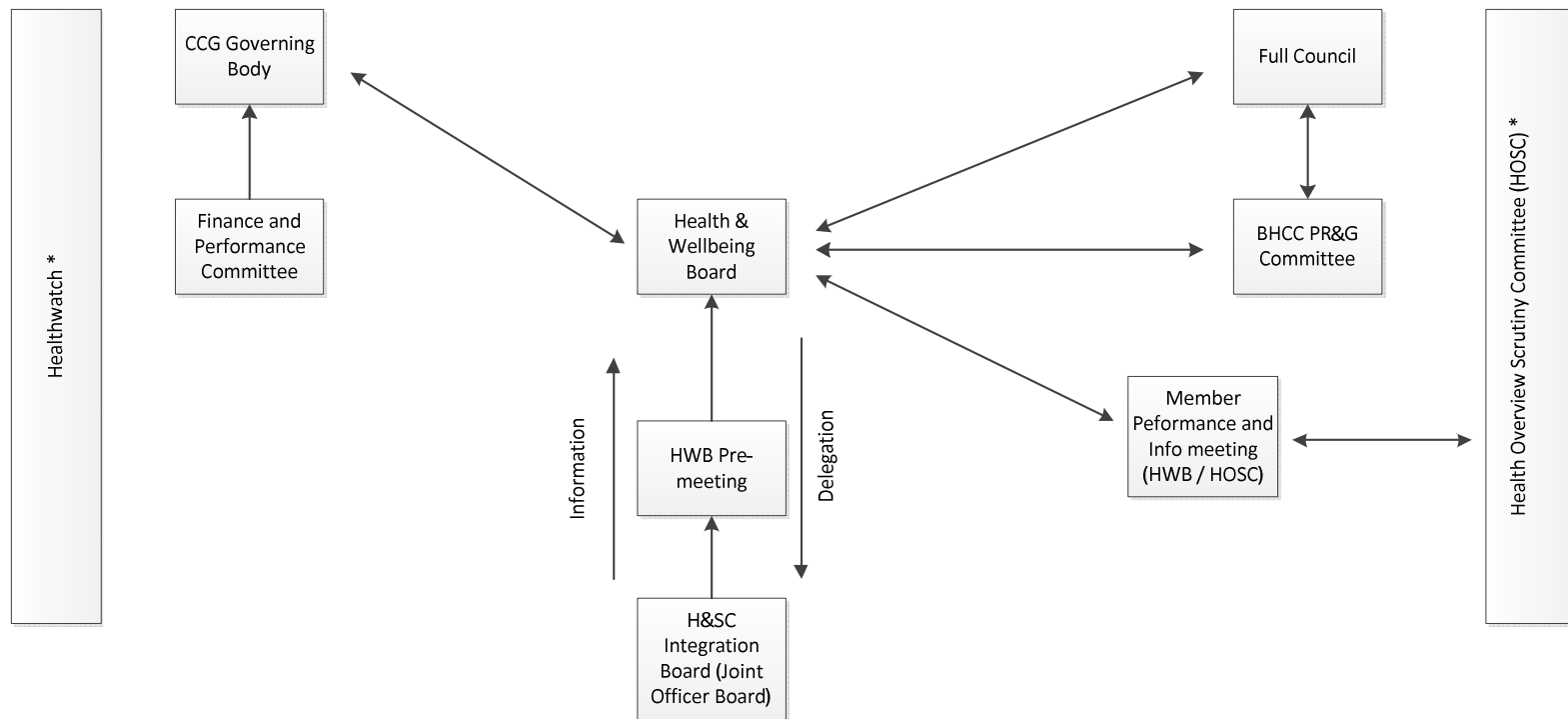
Manging the process

- Integration paper going to CCG GB in November and approved at Brighton & Hove City Council Policy, Resources and Growth Committee 12 October 2017
Report available here:
[https://present.brighton-hove.gov.uk/Published/C00000912/M00006704/\\$\\$ADocPackPublic.pdf](https://present.brighton-hove.gov.uk/Published/C00000912/M00006704/$$ADocPackPublic.pdf)
- With recent announcement of establishment of Central Sussex Commissioning Alliance from January 2018 we are actively discussing a complementary relationship with city based integration proposals
- Formally begin shadow year working together from April 2018
- Start to see some changes now e.g. Board papers being more strategically focused
- The shadow year governance structure follows



Governance Structure

Proposed shadow year Governance arrangements commencing April 2018



Hove Caring Together.
* Whole system scrutiny

Questions and discussion

Dr. David Supple
Rob Persey

