



HEALTH AND WELLBEING BOARD: 25 JANUARY, 2018

REPORT OF THE UNIFIED PREVENTION BOARD

HEALTH AND WELLBEING BOARD UPDATE REPORT

Purpose of report

1. The purpose of this report is to update on the work of the Unified Prevention Board (UPB) in delivering the prevention approach for Leicestershire, and how this work flows into the work of each partner organisation.

Link to the local Health and Care System

2. The Unified Prevention Board (UPB) was created as a sub-group of the Leicestershire Health and Wellbeing Board. It oversees the development and delivery of prevention activities underpinning the health and wellbeing strategy for Leicestershire and more recently ensuring the objectives of the new Sustainability and Transformation Partnership (STP) prevention work stream are closely aligned with the Leicestershire prevention strategy, and are jointly delivered locally as needed across Leicestershire.

Recommendation

3. The Health and Wellbeing Board is asked to note the contents of the report and progress to date.

Background

4. Over the last twelve months progress has been made with partners agreeing a single set of outcomes for the UPB, against which progress can be measured. This will set out a unified model from which a set of joint commissioning intentions can be generated to inform future decisions.
5. Between April and September 2017 the UPB discussed and agreed four key outcome pillars that it was felt all partners contributed to in helping residents maintain their own health and wellbeing. These were:
 - a. Keep Well;
 - b. Keep Safe;
 - c. Stay Independent
 - d. Enjoy life
6. Three cross-cutting programmes of work were identified as the focus in developing the unified prevention offer:
 - Joined up communications

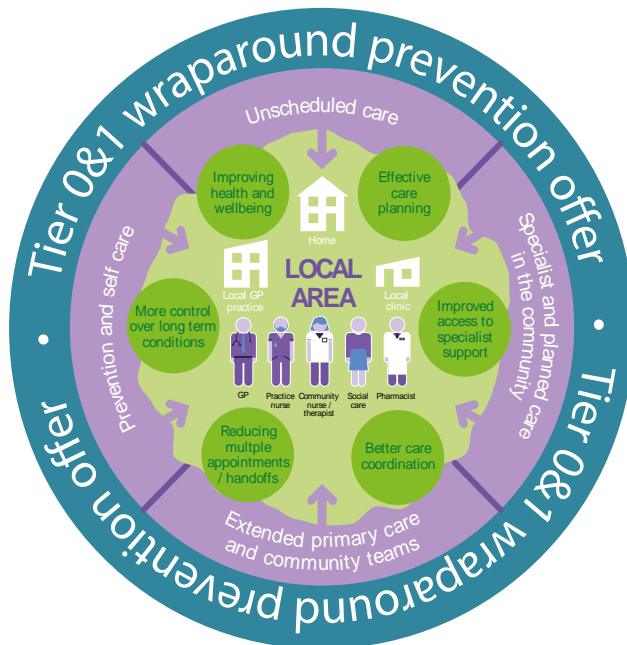
- Lessons learned from key integration programmes
- Healthy workforce = Healthy Leicestershire

Update on achievements to date

7. **Joined Up Communications** – The key purpose of this programme is to provide consistent messages across partners, creating greater impact when communicating with our residents. The intention is to saturate the public with consistent messages from all partners at the same time. In June, the self-care campaign and accompanying strategy was agreed and launched. This covered many areas, but overall was about an individual looking after themselves in a healthy way. This aimed to re-enforce national and local public health messages, drive support and participation in self-care and to encourage behaviour change and perception through self-care actions and increase awareness and understanding of how to navigate the healthcare system. This collaboration met the desired outcomes as the campaign was co-ordinated across partners enabling them to engage more effectively. As a result of this, communications have improved.
8. **Lessons Learned from key integration programmes** – In September the board focused on learning from the Braunstone Blues project which brought together all three blue light services in an area of high service need to support the community and to develop positive outcomes. This will influence how we bring together key organisations to create the prevention support to Integrated Locality Teams and gives us a blueprint to work from. For example good practice on developing a ‘heat map’ to identify areas of need will be used to focus the locality element of the wrap-around prevention offer.
9. **Healthy Workforce = Healthy Leicestershire** – In recognition that good health and wellbeing of public sector employees can positively impact the health of Leicestershire, the UPB endorsed a programme of work relating to workforce health. A good example of this work in practice, is through the ‘Employers for Carers’ scheme. Through the UPB, Leicestershire County Council as the umbrella organisation linked to District Chief Executives encouraging them to join and explaining the importance of support for carers in the workplace. This helps to prevent carer breakdown, reduce sickness amongst staff that are carers, and helps staff retention. It recognises that supporting carers in the workforce is essential to reducing demand on statutory services and acknowledges the vital work they do in a carers own workplace. A number of districts have now signed up to this.
10. From October to December, the board has been working on requirements to support the social prescribing model for Leicestershire. The local definition for social prescribing was agreed in April 2017 as:

“A mechanism for empowering people to help themselves and link individuals that need it, with non-medical sources of support within the community. It will ensure that the response given is appropriate to the individual and allows them choice and influence over their wellbeing”.

11. Work began to develop the social prescribing model as the wrap-around prevention offer to support Integrated Locality Teams (ILT). The ILT's will initially focus around 3 cohorts of need; people with multiple long-term conditions, those with a frailty marker and patients that are high cost service users.



- Tier 0 focuses on building community capacity enabling people to support themselves; building skills and infrastructure enabling them to rely less on specific services.
- Tier 1 focuses on supporting people to remain independent, supporting good health and wellbeing and offering information and advice services to support self-help.

12. The prevention model will include universal services – those that are available to all residents, targeted services – those that meet the needs of the 3 ILT cohorts and locality based services – those that are specific to a local area. Building the locality part of the prevention offer will be done in conjunction with voluntary sector organisations and led by district health leads.
13. First Contact and First Contact Plus is the front door for this offer linking patients to a wide range of county and locality based support services. The scheme offers access to a range of low level preventative services through a single point of contact.
14. Further work for the remainder of 2017/18 includes the production of a prevention plan that will further detail to the work underway and how the three programmes will deliver against the four outcome pillars within 2018/19. This will include identifying gaps in service delivery to support infrastructures such as Integrated Locality Teams.

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Relevant Impact Assessments

Equality and Human Rights Implications

15. The work being undertaken would have a positive impact on the health of the population.

Partnership Working and Associated Issues

16. The recommendations within this report focus on actions across agencies that will improve the population's health. The basis of the report is improving population health in partnership with other key agencies.