

# CABINET - 9 MARCH 2018

# DEVELOPMENT OF AN INTEGRATED LIFESTYLE SERVICE FOR LEICESTERSHIRE

# REPORT OF THE DIRECTOR OF PUBLIC HEALTH

# **PART A**

# **Purpose of the Report**

1. The purpose of this report is to seek the Cabinet's approval to consult on a new proposed model for integrated lifestyle services for Leicestershire.

## Recommendations

- 2. It is recommended that:
  - a) The draft model for the delivery of integrated lifestyle services, as set out in paragraphs 18 to 21 in this report, be agreed for consultation;
  - b) A further report be submitted to the Cabinet in autumn 2018 regarding the outcome of the consultation and presenting the final service model for approval.

#### **Reasons for Recommendations**

- The County Council has a statutory duty to take appropriate steps to improve the health of people living in Leicestershire. This includes the provision of health improvement information, advice and services aimed at preventing illness.
- 4. Multiple unhealthy behaviours that contribute to ill health such as poor diet, smoking etc. often cluster in the same populations. An integrated approach will enable services currently offered separately to be more targeted and therefore more effective in addressing unhealthy behaviours. This approach may also generate cost efficiencies by avoiding duplication and through the use of alternative delivery models (e.g. text messaging and online support) which have been shown to be successful through First Contact Plus and the Quit Ready programmes.

#### **Timetable for Decision (including Scrutiny)**

5. The Health Overview and Scrutiny Committee will consider the proposed new service delivery model at its meeting on 30<sup>th</sup> May 2018 as part of the consultation process.

- 6. The outcome of the consultation together with the final delivery model will be submitted to the Cabinet for approval in the autumn of 2018.
- 7. Subject to approval by the Cabinet, implementation of the integrated lifestyle service will commence in September 2019.

# **Policy Framework and Previous Decisions**

8. In June 2016, the Cabinet considered the outcome of an independent review of Early Help and Prevention (EHAP) services and approved the EHAP Strategy arising from that review. The proposed new model for integrated lifestyle is within the scope of this Strategy and will form part of the prevention offer in Leicestershire as set out in the Target Operating Model for prevention in the EHAP review.

## **Resource Implications**

- 9. The integration of lifestyle services is expected to achieve savings of approximately £65,000 per annum which would contribute towards the Council's Medium Term Financial Strategy savings target. The total remaining budget for the service will be £593,669 per annum.
- 10. The Director of Corporate Resources and the Director of Law and Governance have been consulted on the content of this report.

## <u>Circulation under the Local Issues Alert Procedure</u>

11. This report has been circulated to all Members of the County Council via the Members' News in Brief.

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# PART B

## Background

- 12. There is strong evidence for investing in prevention to reduce health inequalities and reduce future health and social care demand. Reducing unhealthy behaviours is predicted to prevent up to 80% of diseases such as heart disease, stroke and Type 2 diabetes, as well as a third of cancers.
- 13. The County Council currently commissions a number of services (e.g. weight management support and alcohol advice), as well as providing some in-house services (e.g. smoking cessation) all of which are aimed at preventing diseases by tackling the key lifestyle risk factors smoking, alcohol use, physical inactivity, and poor diet. These services currently operate separately, however approximately 25% of the adult population engages in combinations of 3 to 4 such unhealthy behaviours, meaning that many people will be targeted twice or more by different public health interventions.
- 14. A more coordinated, integrated approach to lifestyle services will mean that people accessing one service could also be offered other lifestyle advice where appropriate, thus improving access and avoiding duplication of effort. It is expected that this approach will also be more cost-effective than commissioning lifestyle services separately.
- 15. The recent implementation of First Contact Plus and the new stop smoking service, Quit Ready, has shown that the way the public want to access health improvement advice and support is changing. These services have reported good outcomes through the increased use of phone, text and online support. The proposed new integrated lifestyle service will build on what has been learnt through these programmes and make greater use of such digital approaches.

#### **Current Lifestyle Services**

- 16. The County Council currently commissions the following services that would be in scope to be considered as part of the integrated lifestyle service:
  - a) Weight Management Service Weight management behaviour support for people who are overweight or obese (based on their body mass index) and who also have existing, but well managed, long-term health conditions. This service is currently provided by Leicestershire Nutrition and Dietetic Service within the Leicestershire Partnership Trust. It offers face-to-face, mainly group-based support with integrated diet and physical activity plans and support is delivered by dieticians. The physical activity component is delivered through physical activity development officers in the seven district leisure services.
  - b) Alcohol Brief Advice Identification of higher risk drinkers and the delivery of alcohol brief advice, provided currently by GPs and pharmacists as part of a community based services contract.

- c) Physical Activity Services Assessment of current physical activity levels and targeted support through predominantly group-based community exercise programmes offered through the seven district leisure services.
- 17. The County Council also directly provides the smoking cessation service, Quit Ready, which was brought in-house in 2017, and it operates First Contact Plus, a health information, advice and support service. These services could also be incorporated into the new integrated service model.

# Proposed New Model for Integrated Lifestyle Service

- 18. In developing the new service it is proposed that the existing separately commissioned services listed in paragraph 16 would be redesigned to form a more holistic and integrated service that could be more closely aligned with existing in-house services. Support would be offered using telephone, text and web-chat approaches with supplementary face to face groups for specific, targeted, service users.
- 19. It is expected that the new integrated service model will enable more people to receive lifestyle support than is currently the case. This is because part of the redesign would include the development of online support and signposting for self-help which would fill a current gap. This in turn could reduce the number of people needing more intensive behaviour support offered by the integrated lifestyle service.
- 20. The proposed integrated lifestyle service will:
  - a) Provide a triage function for assessment and referral to the appropriate level of intervention, determining which factors the individual wishes to focus on.
  - b) Develop, co-ordinate and deliver a personalised package of support with a telephone based "health coach".
  - c) Work collaboratively with other professionals to establish pathways and protocols for referral between services.
  - d) Pro-actively engage key partners and stakeholders to maximize opportunities to promote healthy lifestyles for individuals, families and communities.
  - e) Develop and manage an attractive, high quality website which provides booking access to the support services and written information on behaviour change.
  - f) Be co-located with the existing smoking cessation service Quit Ready, which is delivered in-house within the Public Health department.
- 21. It is intended that the service will operate at 3 levels:

Level 1 – This will be a universal offer of supported self-help. The service will provide evidence-based information on healthy eating, physical activity, alcohol/substance use and smoking cessation, consistent with NICE Guidelines.

Level 2 – This will consist of a telephone based service offering an individualised programme of coaching provided by health coaches, based on behaviour change/self-regulation principles designed to assist with goal setting, maintaining motivation, overcoming barriers and making sustainable lifestyle changes.

Level 3 – This will include targeted face-to-face support for certain groups at certain times (e.g. people with learning disabilities or at the beginning and end of the support programme) or dietetic support for more complex service users (e.g. with multiple health conditions).

# **Consultations**

- 22. Subject to approval, a public consultation exercise is planned to take place between May and July 2018. The consultation will seek the views of the general public and key stakeholders such as local providers, community pharmacists, GPs, CCGs, and existing service users. This will be done through an online questionnaire on the Council's website and via targeted consultation with service users (e.g. using focus groups), and with the Leicestershire Equalities Challenge group.
- 23. Staff will be actively encouraged to participate through the online survey.
- 24. The outcomes of the consultation will determine the final model for the new integrated service which will be presented to the Cabinet for approval.

#### **Equalities and Human Rights Implications**

25. An Equality and Human Rights Impact Assessment (EHRIA) report will be completed in relation to the impact of any change in service model which will be informed by the outcomes of the consultation. The EHRIA report will be presented to the Cabinet alongside the consultation outcomes to assist the Cabinet with the exercise of its Public Sector Equality Duty under the Equality Act 2010. The Equality Act 2010 imposes a duty on the local authority when making decisions to exercise due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster food relations between people who have a protected characteristic and those who do not. The screening EHRIA is appended.

#### **Background Papers**

Report to the Cabinet – 17 June 2016 - Early Help and Prevention Review and Strategy

http://politics.leics.gov.uk/ieListDocuments.aspx?Cld=135&Mld=4603&Ver=4

#### <u>Appendix</u>

Equality and Human Rights Impact Assessment Screening

