



HEALTH OVERVIEW AND SCRUTINY COMMITTEE: 30 MAY 2018

REPORT OF DIRECTOR OF PUBLIC HEALTH

REMODELLING OF INTEGRATED LIFESTYLE SERVICE PROVISION

Purpose of report

1. The purpose of this report is to seek the views of the Health Overview and Scrutiny Committee on the proposed new model for an integrated lifestyle service. Formal consultation on these proposals will commence 30 May 2018.

Policy Framework and Previous Decisions

2. 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 an integrated lifestyle service 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.

Background

3. 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.
4. The County Council currently commissions a number of services (e.g. weight management support and targeted physical activity), 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, 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.
5. 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, avoiding duplication of effort and providing a more holistic, person-centred service.

6. 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.

Proposals

7. The new service will be in place by 1st September 2019 and will be for adults only. The vision is to have a more integrated lifestyle behaviour change system, co-ordinating better the Council's services that support the healthy lifestyles of Leicestershire's residents. This means better integrating weight management and physical activity services with existing in-house services (Quit Ready and First Contact Plus) and co-ordinating access to these through a centralised triage and case management function.
8. To achieve this it is proposed that we:
 - a. Develop more comprehensive web-based information and advice, available to everyone, to help people adopt healthy lifestyles on their own. This is supported self-help.
 - b. Introduce a telephone-based triage and holistic assessment function to determine what lifestyle behaviour changes people want to make and to ensure that they are ready to make those changes. For those ready to make changes towards healthier lifestyles this will result in the creation of an individualised behaviour change plan. The plan will include more co-ordinated referrals to appropriate specialist lifestyle support (smoking cessation, weight management and physical activity) and subsequent follow up to re-assess progress and future goals. This triage, assessment and follow up would be delivered through an extension of the First Contact Plus service.
 - c. Improve the referral of service users into an existing physical activity pathway provided locally by district leisure services and their partners and funded by public health.
 - d. Redesign health education for the public and professionals around healthy eating and cookery skills so that it is more integrated with existing council services.
 - e. Recommission the weight management service with delivery that is in-line with approaches used to help people stop smoking, i.e. using more digital and phone-based behaviour change support with some face to face support for targeted groups.

Weight management service redesign

9. Weight management services are categorised into 4 tiers by the National Institute for Health and Care Excellence:
 - a. Tier 1 services are preventative services for healthy eating (including cooking, growing etc) and physical activity and are delivered population-wide and through

environmental change approaches. Commissioning is the responsibility of the local authority.

- b. Tier 2 services are multicomponent weight management services focussed on identification, assessment and intervention. Commissioning is the responsibility of the local authority.
 - c. Tier 3 services are multi-disciplinary specialist services targeting patients at high or immediate risk as a result of obesity. Commissioning is the responsibility of Clinical Commissioning Groups (CCGs).
 - d. Tier 4 services are for highly specialist bariatric surgery and medical interventions for obesity. Commissioning is the responsibility of CCGs.
10. The current weight management service is a tier 2, integrated child and adult contract with Leicestershire Nutrition and Dietetic Service (Leicestershire Partnership Trust). As the new lifestyle service will be for adults only, with more use of telephone-based methods of delivery, specialist weight management support for children will be separated out and continue through alternative delivery routes out-with the scope of this proposal.
 11. It is proposed that the adult weight management service will operate using three approaches to form an integrated tier1/2 service:
 - 1) Universal tier 1 support – The provision of online evidence-based information on healthy eating, nutrition and cooking online that is consistent with NICE Guidelines. This will be available to everyone.
 - 2) Telephone-based tier 2 support provided by nutritionists using behaviour change/self-regulation principles designed to assist with goal setting, maintaining motivation, overcoming barriers and making sustainable lifestyle changes. This will be available for people who are assessed as being ready to make changes to their weight and are overweight or obese based on their Body Mass Index.
 - 3) Targeted face to face tier 2 support for a smaller group of people who are overweight or obese for whom telephone-based support is not appropriate. This will use the same behaviour change principles as the telephone-based support and will be available for certain groups at certain times (e.g. people with learning disabilities or people with multiple health conditions).
 12. The proposal has been informed by evidence from countries such as Australia (Get Healthy Australia) where mixed-methods based weight management programmes have been successful in helping people live healthier lifestyles.
 13. The proposed integrated lifestyle service will work collaboratively with other professionals to establish pathways and protocols for referral between local authority, voluntary sector and NHS services. This would include referral for specialist alcohol treatment, tier 3 weight management and NHS-based exercise rehabilitation programmes.

Consultation

14. The consultation will run for a period of 6 weeks, starting on Wednesday 30 May and ending on Sunday 15 July.
15. The consultation is seeking the views of the general public and key stakeholders such as local providers, community pharmacists, GPs, CCGs, and existing service users. This is being 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.
16. The outcomes of the consultation will determine the final model for the new integrated service which will be presented to the Cabinet for approval.

Resource Implications

17. The remodelling of the integrated lifestyle service is expected to achieve a Medium Term Financial Strategy (MTFS) savings target of £65,000 per annum. The budget in scope will be £259,000 leaving a remaining budget for the service of £194,000 per annum.
18. As part of the service remodel, it is possible that the Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE) will apply, depending upon the final agreed model. Human Resources will be engaged as the service model is developed in order to ensure the process goes smoothly.

Timetable for Decisions

19. Following the consideration of this report by the Health and Overview Scrutiny Committee and completion of the public consultation, the final model and re-procurement plan will be presented to the Cabinet in Autumn 2018 for approval. This will ensure the timetable for the project is met and a new service can be in place as required by 1st September 2019.

Reccomendation

20. The Scrutiny Committee is asked to comment on the new model for an integrated lifestyle service as part of the consultation process.

Background papers

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

<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=4603&Ver=4>

Report to the Cabinet - 9 March 2018 - Development of an integrated lifestyle service for Leicestershire.

<http://politics.leics.gov.uk/documents/s136138/Integrated%20Lifestyle%20report%20final.pdf>

Circulation under the Local Issues Alert Procedure

None

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List of Appendices

Appendix - Equality & Human Rights Impact Assessment (EHRIA)

Relevant Impact Assessments**Equality and Human Rights Implications**

21. 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 good relations between people who have a protected characteristic and those who do not.
22. The screening EHRIA is appended.

Partnership Working and associated issues

23. The new service will work collaboratively with existing providers of specialist lifestyle-related treatment services. This includes exercise referral services, provided by district councils and their partners, NHS-commissioned tier 3 and 4 weight management services and specialist physical activity programmes such as cardiac and pulmonary rehabilitation and with providers of specialist substance misuse services.

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