

Agenda Item 53.

TITLE	BOB STP Prevention Update
FOR CONSIDERATION BY	Health and Wellbeing Board on 14 December 2017
WARD	None Specific
DIRECTOR/ KEY OFFICER	Katie Summers, Director of Operations NHS Wokingham CCG and Darrel Gale, Public Health Consultant

Health and Wellbeing Strategy priority/priorities most progressed through the report	<p>This report meet all four priorities of the HWB Strategy</p> <p>Priority 1 – Enabling and empowering resilient communities;</p> <p>Priority 2 - Promoting and supporting good mental health;</p> <p>Priority 3 - Reducing health inequalities in our Borough;</p> <p>Priority 4 - Delivering person-centred integrated services.</p>
Key outcomes achieved against the Strategy priority/priorities	To provide assurance to the Board on the activities of the BOB STP prevention group and develop an understanding on how these activities could support and work alongside the Health and Wellbeing Priorities

Reason for consideration by Health and Wellbeing Board	The Board's views and their support to the STP Prevention Programme is key to success on moving from reactive care to proactive care
What (if any) public engagement has been carried out?	None
State the financial implications of the decision	None specifically

<p>RECOMMENDATION</p> <p>That the Board note progress against delivery of the six STP themes within the BOB STP Prevention Workstream</p>
<p>SUMMARY OF REPORT</p> <p>This report is intended to give the Health and Wellbeing Board an information update on the work of the Prevention Workstream that is part of the Buckinghamshire, Oxfordshire and Berkshire West Sustainability Transformation Plan (BOB STP). The report sets out the 6 themes that are the focus of this work, giving the vision, deliverables and progress</p>

to date. The 6 themes are: obesity, physical activity, tobacco, Making Every Contact Count, Digital solutions and Healthy Workforce. The work going on in the BOB STP Prevention Workstream is variable across the themes and is evolving continuously. Progress has been made and collaboration continues across the 3 geographical areas within BOB and the different disciplines. The Prevention Workstream group continues to have good buy-in from Directors of PH and their representatives from Buckinghamshire, Oxfordshire and Berkshire West.

Sustainability and transformation partnerships build on collaborative work that began under the NHS Shared Planning Guidance for 2016/17 – 2020/21, to support implementation of the Five Year Forward View. They are supported by six national health and care bodies: NHS England; NHS Improvement; the Care Quality Commission (CQC); Health Education England (HEE); Public Health England (PHE) and the National Institute for Health and Care Excellence (NICE).

The development of STPs is driven by Joint Strategic Needs assessments and Health and Wellbeing Strategies. Wokingham is part of the Buckinghamshire, Oxfordshire and Berkshire West STP footprint (BOB STP).

The challenges and opportunities facing NHS and care services across Buckinghamshire, Oxfordshire and Berkshire West (BOB) are set out in a five-year Sustainability and Transformation Plan (STP). The plan demonstrates how the NHS will work to improve health and wellbeing within the funds available and also highlights how it will work in partnership with the Local Authorities to address the many challenges that exist including growing populations, higher proportion of older people, inequalities in health, increase in complex and costly treatments etc.

The BOB STP has as its focus the following areas:

- Shifting the focus of care from treatment to prevention
- Ensuring Access to the highest quality primary, community and urgent care
- Facilitating collaboration of the three acute trusts to deliver quality and efficiency
- Maximising value and patient outcomes from specialised commissioning
- Developing Mental health services to improve the overall value of care provided
- Establishing a flexible and collaborative approach to workforce
- Developing Digital interoperability to improve information flow and efficiency

The BOB STP Prevention Workstream

The vision for the STP Prevention programme is to provide ‘A proactive approach to disease prevention within all that we do, shifting the focus of care from treatment to prevention, addressing unhealthy behaviours that may lead to serious conditions further down the line and thus reducing the burden on the healthcare system. We will take action to motivate people to take ownership of their own health and encourage healthy environments to enhance the quality of life for our population’

There are a wide range of programmes that support the aim of shifting the focus of care from treatment to prevention in all settings. The programmes that have been identified for the BOB STP are:

- Obesity
- Physical activity
- Making Every Contact Count
- Tobacco

- Improving Workforce Health
- Digital self care
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The overall objectives for all of these areas of work are twofold:

1. To embed prevention within the local transformation programmes
2. To collaborate across BOB on areas where there is benefit of working at scale.

There is also an aim to continue working together to identify other BOB wide opportunities that may include alcohol and social prescribing.

The most appropriate level at which each programme should be led and delivered within the health and care system has been agreed through the STP. This has been based on the partnerships and scale required to best implement the specific programmes. A stocktake of all initiatives was undertaken and schemes were chosen based on the following principles:

1. There is a clear opportunity/ benefit in doing it jointly, to deliver improvement in terms of finance, quality and/or capacity
2. Doing something once is more efficient and offers scale and pace
3. Collective system leadership is required to make the change happen

The case for change in Buckinghamshire, Oxfordshire and Berkshire West

The overall health and wellbeing of the populations across the BOB STP footprint is generally good however areas of deprivation and poor health are often masked. Inequalities in health exist across all three localities. Higher levels of obesity and smoking are more prevalent in certain groups including those on low incomes and living in deprived areas. There is a commitment in the BOB STP Prevention Workstream to focus on developing system wide initiatives to reduce the burden of ill health due to physical inactivity, poor diet and smoking as well as a recognition that this needs to be done in partnership with CCGs, Local Authorities, Public Health, NHS Trusts and The Academic Health Sciences Network (AHSN).

There is a strong evidence base showing that the health and wellbeing of residents can be improved and demand on health and social care services reduced through people changing to healthier lifestyle behaviours, including being more physically active, eating a healthier diet, maintaining a healthy weight and not smoking. Return on investment tools have shown that for the BOB footprint the savings could be as much as £9 million over a 4 year period.

There are already examples of joint commissioning in prevention across Berkshire West for smoking cessation and tier 2 weight management services and these demonstrate the advantages of commissioning at a wider level with multiple partners. There are also examples of joint commissioning with CCGs and LAs through the Better Care Fund. All this can be built upon and extended across the BOB STP.

Update on Progress to date in the six areas of work of the BOB STP Prevention Workstream

Throughout 2017/18 the work is being further developed and plans implemented..

Obesity

Vision: To agree and develop a pathway for commissioning obesity prevention and treatment services which is consistent across the BOB area.

- Milestone status is **green**.

A joint workshop was held at Reading Civic Centre bringing together Clinical Commissioning Group (CCG) and Public Health obesity leads from Berkshire West, Oxfordshire and Buckinghamshire. In addition there were clinicians from the main hospital trusts who deliver tier 4 bariatric services and providers of a community based tier 4 service in Buckinghamshire. This was a very productive meeting with the following aims:

1. To inform commissioning for Tier 3 and 4 weight management services in Buckinghamshire, Oxfordshire and Berkshire West, exploring any opportunities for collaborative commissioning.
2. To discuss current positive practice and learn from local and national experiences (good or bad) including how CCG commissioned services dovetail with local authority commissioned tier 1 and tier 2 services.
3. To provide a safe and informative environment to discuss and seek 'buy in' to vision and direction.

The workshop identified a number of key issues: that a clear pathway was needed across BOB linking all tiers of weight management and that LAs, CCGs and major providers must work collaboratively to provide this; that current tier 4 bariatric surgery includes an element of tier 3 whereby patients are helped to lose weight to prepare for their surgery but that a new focus for tier 3 services could also be helping bariatric patients to lose weight thus eliminating the need for surgery; any tier 3 service would have to be accessible to patients so a degree of local delivery would be needed; an addition to tier 3 services could be the use of apps, skype etc to improve accessibility.

A further meeting has been held to discuss the outcomes of the workshop and agree a way forward. The development of a business case for tier 3 weight management services across BOB is being carried out.

Physical inactivity

Vision: To maximise the use of the IT patient portal, identify through consultations, patients who are physically inactive and use technology and social media approaches to improve their activity levels. To incorporate Physical Activity as a treatment prescription for condition pathways.

- milestone status is **amber** and this group is in the pre-implementation phase.

A suggested focus for this group is to work with the cancer and diabetes clinical networks to develop model pathways showing where physical activity can be incorporated into disease pathways. Front line staff will be encouraged to get more proactive about including advice on physical activity as part of their advice to patients. This approach links in with the Public Health England (PHE) Physical Activity Champions initiative.

In addition a pilot is starting PHE is starting a pilot project, the Physical Activity Clinical Advice Pad pilot, whereby five local authority-Clinical Commissioning Group partnerships will test out the use of a clinical advice pad to aid clinicians in promoting physical activity as part of routine care in Primary Care.

The investigation of the use of physical activity apps and on-line advice and support to help people be more active is ongoing.

Tobacco

Vision: To reduce significantly the number of smokers who have surgical interventions.

- milestone status is **amber**.

The importance of addressing tobacco has been recognised by the BOB STP Prevention Group and this fits with the focus on reducing smoking prevalence of the Thames Valley Cancer Alliance. As the lead commissioners of smoking cessation services the LAs will be required to work with the CCGs to decrease smoking prevalence in routine and manual workers, where there is still a relatively high rate of smoking in comparison with the rest of the population. In addition there will also be a focus on further decreasing smoking in pregnancy as a key outcome. Further joint plans for smoking cessation and tobacco control are under development.

The programme is working with the Thames Valley Clinical Senate who are reviewing the smoking cessation services in the acute trusts within BOB and Frimley. The Senate have recognised the evidence of benefits to patient outcomes if they were able to stop smoking before an operation and looked at the level of support they were given, in hospital, to stop on a long or short term basis. The information obtained identified that there is much more that can be done in the acute sector. The next steps are to establish the blocks which are restricting this. The STP have looked at an example of work being done in Portsmouth which has significantly increased the smoking cessation conversations in the Trust, increased the referrals to stop smoking services and the number of patients quitting. We also looked at the work of the London Senate who initiated a major programme in 2014 and this is held up as an exemplar by NICE.

Making Every Contact Count (MECC)

Vision: The programme of work aims to embed MECC across organisations to enable the workforce to recognise their role in prevention and reducing inequalities to support the sustainability of the health and social care system; building on existing initiatives in place across the BOB STP footprint.

- milestone status **green**.

A project approach has been agreed by the BOB STP Prevention Group and a Project lead has been appointed. A project plan and amalgamating intelligence gathered through the use of a MECC stocktake sent to NHS and LA organisations on the status of MECC is currently being used to co-produce and design a MECC training package. The model includes determining the number of MECC trainers that will be needed across BOB, setting up a train the trainer cascade for sustainability, employing MECC Co-ordinators in each locality and developing MECC Champions in all sectors. The MECC approach will be widely used and it is envisaged that front line workers in the NHS, LAs, police, fire service and voluntary and third sector organisations will all undergo MECC training and see it as part of their everyday role. MECC training could be included in staff induction programmes and this approach will be seen as the norm for front line staff.

The two health behaviours that can be identified and addressed through MECC in the first instance are smoking and obesity. MECC will also be a clear plank in the workforce health workstream.

Digital self care

Vision:

To Support the general wellbeing of service users and carers through the use of digital, supporting patients with managing their conditions. To use digital technology to lead

prioritisation of care by clinical and social care professionals. To make a joined up and informed investment around patient facing technology (opposite of as is state)

- Milestone status is **amber**

This work continues however a complete detailed review and specification of services has been deemed to be in scope of an Accountable Care System (ACS) corporate service. It will be of paramount importance as ACSs evolve that prevention is included within digital specifications across the board.

The work of the 12 month pilot project being developed in Berkshire involving the NHS and Microsoft is continuing, involving 400 volunteers who are NHS staff wearing a digital device (Garmin Watch) 24 hours a day for the period of one year. A number of parameters will be monitored including BP, HR, activity levels and sleep and the aim is to understand if the wearing of an electronic monitoring device can in fact have a positive effect on health and wellbeing.

The use of digital technology is a focus of all of the prevention workstreams.

Workforce health

Vision: To improve and sustain workforce health and wellbeing and employee confidence to promote healthy lifestyles to others

- milestone status is **green**

BOB Healthy workforce group has completed a benchmarking exercise to understand how public sector organisations are caring for the health and wellbeing of their staff. Links have been made with the MECC lead, the work of the STP Workforce stream and with Occupational Health Services.

The focus of the group has been mental health and wellbeing in the workplace. Berkshire Healthcare Foundation Trust (BHFT) has employed a dedicated mental health practitioner for staff wellbeing. The impact is being evaluated. In addition BHFT have action plans that incentivise staff health and wellbeing through their CQUIN programme and staff have been provided with resilience training in Frimley to support the launch of their staff wellbeing strategy.

Wherever innovative and effective workforce health strategies and initiatives are being implemented, these examples will be used to inform and encourage other organisations to utilise similar approaches. In this way we can embed good practice already in place to encourage consistency of wellbeing offer across BOB, through disseminating case studies, success and evaluation measures and offering peer support. In this way a culture is created where staff Health and Wellbeing is used proactively within organisations e.g. during organisational change and is considered in conjunction with other organisational activities e.g. Education and Training, retention programmes etc.

Partner Implications
It is important that all relevant partners feel engaged with and contribute to both the HWB Strategy and the STP Prevention programme .

Reasons for considering the report in Part 2
None

List of Background Papers

None

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