

**Report to:** Cabinet

**Date of meeting:** 10 July 2017

**Report Title:** Healthy Hastings & Rother Reducing Health Inequalities Programme

**Report by:** Andrew Palmer  
Assistant Director – Housing & Built Environment

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**Purpose:**

1. To update Members on the delivery of the Hastings Borough Council (HBC) led projects within the NHS Hastings & Rother Clinical Commissioning Group's (CCG) Healthy Hastings & Rother (HHR) programme in 2015/16 and 2016/17.
2. To seek approval for the enhanced programme of HBC led projects funded from the CCG's HHR programme in 2017/18, 2018/19 and 2019/20.

**Recommendations:**

1. To note progress with the delivery of the HBC led projects within the CCG Healthy Hastings & Rother Programme.
2. To approve the enhanced programme of HBC led projects as described in the report, within the financial resources available as follows:  
2017/18 - £107,752  
2018/19 - £1,145,924  
2019/20 - £457,600
3. To authorise the Director of Operational Services to take the necessary steps to develop and deliver the projects in consultation with the Deputy Leader.

**Introduction**

1. Over the past two years the NHS Hastings & Rother Clinical Commissioning Group (CCG) has allocated £1.802m from its Healthy Hastings & Rother Programme, for Hastings Borough Council (HBC), Rother District Council (RDC), the CCG and other partners to invest in projects, which will address health inequalities. Reducing health inequality is a priority of East Sussex Better Together, which is a joint programme between the local NHS, East Sussex County Council and partners to transform health and social care.
2. In July 2015 HBC Cabinet approved an initial programme of work with CCG funding of £0.602m. This was supplemented with further CCG funding of £1.2m in 2015/16 and the enhanced work programme received HBC Cabinet approval in August 2016. The programme builds upon priorities shared between HBC and the CCG and is supporting delivery of projects that reflect a number of key thematic areas:

- Preventing ill health
  - People Experiencing Ill Health
  - Health and Wellbeing Centres
  - Healthy Housing – People & Places
3. This report seeks approval for further enhancement to the programme with CCG funding of £1.711m allocated over this financial year and the two subsequent financial years until 31 March 2020. It also provides a brief update on progress with each project at the end of Quarter 4 (Q4) 2016/17 at Appendix 1. In addition, an overview of the funding allocations and actual / forecast expenditure is provided for the whole programme at Appendices 2 and 3.

### The Healthy Hastings and Rother Programme (HHR)

4. The HHR programme aims to reduce health inequalities by improving the health and wellbeing of people in Hastings and Rother's most disadvantaged communities. It is led by the CCG, and supported by a range of partners, including Hastings Borough Council, Rother District Council, East Sussex County Council (ESCC), East Sussex Healthcare NHS Trust (ESHT) and the voluntary and community sector. The HHR's objectives are to:
- i) Reduce variation in access to or quality of services.
  - ii) Empower individuals to improve health and wellbeing.
  - iii) Empower communities to improve health and wellbeing.
  - iv) Enhance support for the health needs of vulnerable population groups.
  - v) Improve the social determinants of health.
  - vi) Measure the impact of projects, the programme, evaluate and share the learning.
  - vii) Specify health inequalities outcomes and further develop specific HHR targets and success indicators.
  - viii) Enhance collaborative working with stakeholders in order to take action on health inequalities.
  - ix) Support the development of local leadership expertise and capacity to influence and ensure effective action to reduce health inequalities.
  - x) Ensure health inequalities considerations are systematically embedded in East Sussex Better Together's (ESBT) planning and investment decisions.

HHR is part of ESBT set up in 2014 to galvanise the transformation of health and social care services. ESBT has the shared ambition of developing a fully integrated health and social care system in East Sussex by 2018 to make the best use of the resources available to meet the health and care needs of local people. The CCG has agreed a recurrent annual budget of up to £5m for investment in initiatives to reduce health inequalities in Hastings and Rother through the HHR programme.

5. Since 2014 the HHR programme has supported delivery of more than 60 diverse projects, working closely with a mix of statutory, voluntary and community sector

partners and these have ranged from a welfare benefits and debt advice service to a community farm project that helps people with learning disabilities and autism improve their cooking skills. To date the programme has delivered projects that contribute to the following:

### **Investing in GP and Pharmacy Services**

- Launched a healthy living community pharmacy programme to improve access to health promotion, self-care advice and supporting people with long term conditions
- Improved referral pathways and/or signposting between GP practices and voluntary and community sector organisations

### **Increasing Support to Communities**

- 56 small grants with a value of £420k awarded to voluntary and community sector organisations to improve the health of local people and communities
- Improved heating and insulation for vulnerable people living in cold homes with grants and by supporting enforcement of housing standards
- Consulted and listened to people and communities to understand how to continue to improve outcomes for those with the poorest health

### **Improving Mental and physical health and wellbeing**

- Launched i-Rock, a 'one stop shop' for young people aged 14-25 years to provide support for emotional and mental wellbeing, education, employment and housing, assisting over 200 young people since June 2016
- Worked with ESCC Children's Services to deliver a Positive Parenting Programme which is proving to be transformational for parents and carers
- Supported the Welfare Benefits and Debt Advice project to help people access benefits they are entitled to and/or may have been unaware of. 5,900 people received advice during 2016/17 and 79% of people using the service reported an improvement in their mental wellbeing
- Worked with ESHT and ESCC to provide a Making Every Contact Count (MECC) project which has trained 500 staff and volunteers to use opportunities during routine interactions with people to have brief conversations on ways of making positive changes to their health and wellbeing

### **Cancer Awareness**

- Used information gathered from a survey of 2,000 local people and work with Cancer Research UK and GP practices to deliver a volunteer led project, which over the next two years will raise awareness about the signs and symptoms of cancer and encourage local people to take part in the national cancer screening programmes

6. In May 2017, the CCG published a leaflet (copy attached to this report) updating key priorities for investment over the next two years, as follows:

- Initiatives to help pregnant women give up smoking, increase breastfeeding rates in younger women, encourage people to exercise more, and reduce harm caused by alcohol and drug abuse
- Continue to support Health and Wellbeing Community Hubs and start a community co-investment programme with Amicus Horizon and other partners

- Improve support for the health needs of vulnerable people including projects that will benefit people with mental health issues, learning disabilities, those who are homeless, families at risk of domestic abuse and carers
- Scaling up the early detection and management of cardiovascular disease and diabetes
- Projects delivered with local partners, to address factors that contribute to poor health, including education and employment. Supporting the development of local leadership within communities to better enable action to reduce health inequalities
- Refining the programme's performance measures, monitoring its impact and sharing the learning

## HBC Led Projects 2015 – 2017 Update on Progress

7. The projects in the HBC led part of the HHR programme cover a wide range of issues including: improving and sustaining physical activity for inactive adults; promoting learning for unemployed adults with long term mental or physical health problems; improving awareness of domestic violence and abuse (DVA) for primary healthcare professionals and strengthening support for victims of DVA; consultation on developing options for health and wellbeing centres in existing community venues and implementation of recommendations arising from the consultation; the strengthening of housing and support services for rough sleepers and the street community; improved support for homeless people discharged from hospital; and strengthening the Winter Home Check Service with financial support for 'major' heating and insulation measures for eligible people and supporting enforcement of housing standards.
8. There are nine projects in this part of the programme and a summary of the projects and progress achieved on each one at the end of March 2017 is attached at Appendix 1. With the exception of consultation on health and wellbeing centres, which was completed in 2015/16, the majority of projects commenced delivery part way through 2016/17 and will continue activity into 2017/18.
9. The early indications are that there is high demand for services provided through the projects and on the whole good progress is being made. Using a traffic light system six projects are green – Let's Get Moving, Community Adult Learning, Implementation of Health and Wellbeing Community Hubs following consultation, Strengthening the Winter Home Check service, and Support for the Street Community and Rough Sleepers. Two projects are currently described as amber - Health IDVA and IRIS. This is because there were delays in starting both projects. Improvement action plans are now in place and these are having a positive impact on delivery. One project is described as red – Hospital Pathway Homeless Support. This is because development work is still underway in order to inform and scope the future shape of the project, before implementation can commence.
10. Details of the original funding allocated to the programme and the expenditure achieved against each project at the end of 2016-17 are set out at Appendix 2.

## HBC and CCG Proposed Programme - 2017/18-2019/20

11. The CCG has allocated a further £1.711m to support continuation of the HBC led programme between 2017/18 and 2019/20. This will enable projects to continue that meet current CCG and HBC priorities. Details of the funding allocations and forecast expenditure are provided for the programme and by project at Appendix 3.

12. Additional funding of £892,500 will support the six Health and Wellbeing Community Hubs for the next three years. The two domestic violence and abuse projects (IDVA and IRIS) will receive a further £190,000 to enable them to continue until March 2019. The Healthy Homes Places project will receive a further £200,000 to continue to strengthen the Winter Homes Check service until March 2019. The Community Adult Learning project will receive a further £55,800 to continue the service into 2018. The Hospital Pathway Homeless Support project will receive an additional £300,000 to enable the emerging service to continue to the end of March 2019.

## Policy Implications

13. If successful, projects within the programme will contribute to reducing health inequalities and impact positively on:
- Greater community cohesion and sustainability. Poor health outcomes are a significant cause of exclusion and impose significant problems at a personal and community level.
  - Crime and fear of crime, particularly on issues of domestic violence.
  - Local people's views, particularly through work around consultation and engagement on the delivery of health and wellbeing services in community centres
  - Anti-poverty, as health inequalities are widely recognised as both a development and outcome of wider economic exclusion

However, it is important to note that only longer term work will produce significant outcomes for local people.

## Financial and Organisational Implications

14. The work programme will need to be contained within the resources allocated by the CCG, currently £3,513,276, including the additional funding of £1,711,276 for 2017-2020. Project delivery will straddle the next three financial years.
15. HBC does not have the staff resources or the capacity to absorb project management and other costs associated with delivering the programme. These costs will need to be contained within the programme budget. The agreed HBC project management costs will be charged to individual projects. In addition, the programme budget includes an allocation of approximately £135,000 over the five year period as a contribution towards HBC management and central support costs associated with developing and delivering this programme.

## Wards Affected

All

## Policy Implications

Please identify if this report contains any implications for the following:

Equalities and Community Cohesiveness	x
Crime and Fear of Crime (Section 17)	x
Risk Management	
Environmental Issues	
Economic/Financial Implications	
Human Rights Act	
Organisational Consequences	
Local People's Views	x
Anti-Poverty	x

## Additional Information

Hastings & Rother CCG Leaflet – Healthy Hastings & Rother: Working together to improve health inequalities - Spring 2017

## Appendices

1. Healthy Hastings & Rother Programme - HBC Led Projects 2015-2017: Progress
2. Hastings BC Led Projects 2015-17 – Spend at 31 March 2017
3. Hastings BC Led Projects 2017-2020 – Additional Allocations and Forecast Expenditure

## Background Papers

Report to Cabinet – Reducing Health Inequalities – 6 July 2015

Report to Cabinet – Healthy Hastings and Rother Programme – 8 August 2016

## Officer to Contact

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## Appendix 1

### Healthy Hastings & Rother Programme 2015-2017 Projects Led by HBC

Thematic Area	Project Description	Summary of Progress at 31 March 2017	Delivery Lead	Status
Preventing Ill Health	<p><b>Let's Get Moving</b></p> <p>Let's Get Moving (LGM) is a physical activity pathway delivered within GP practices. Active Hastings is leading this 3-year project with support from UK Active, the commissioned training provider. Training for GP practices with the aim of increasing referrals into fitness programmes; and priority is given to those patients who are overweight and inactive. The aim is to signpost them into community based physical activity opportunities. Delivery of advice, support and referral into physical activity programmes is available from Active Hastings, Freedom Leisure and their associated partners.</p> <p>The project also provides a financial contribution of £5k to the Opening Doors to Sport 3 year programme, launched in January 2016, which is targeted at engaging priority groups in sport. The aim of the programme is to increase opportunities for sport in non-traditional settings, such as community centres, parks and open spaces, in key areas of the town where access to traditional sports facilities is limited.</p>	<p>To date 17 GP Practices in Hastings &amp; Rother have signed up to deliver Let's Get Moving, including 7 within the HBC area. UK Active provided training on Let's Get Moving for these GP practices during summer 2016 via 13 courses. The project has been promoted widely through local stakeholder meetings and local communication channels are proactively supporting the opportunities for referrals to be generated. Optimum numbers of referrals are being negotiated with practices over the 3-year project period.</p> <p>In order to ensure that Practice staff have up to date information on physical activity opportunities available to patients, the CCG has worked with the Active Hastings team to promote its quarterly programme within Practices. The programme includes activities provided by the Active Hastings team and many of its partner organisations.</p> <p>Since its launch in January 2016, Opening Doors to Sport has engaged with 961 people (almost 50% of the overall 3 year target) and has had a throughput of over 5,400 visits to activity sessions. 46% of participants stated at registration that they were not reaching the recommended guideline of 150 active minutes per week and 21% had not achieved 30 minutes of activity in the preceding month.</p> <p>In year 1, funding was targeted at Central St Leonards. This has now ended, leaving 8 new weekly sessions that are self-sustaining and run by external instructors. Additionally, a monthly fitness rave has been set up following a successful summer promotion on Hastings Pier in August attended by 170 people. Monthly sessions in Concordia Hall and the Broomgrove Centre continue to be well</p>	HBC – Active Hastings	Green

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		<p>attended. The project has successfully raised the profile of new and existing activities in Central St Leonards through marketing existing activities alongside project sessions. Also it has successfully engaged with some hard to reach groups, e.g. a weekly football session with 40 men from the Hastings Mosque, which during the winter, with project support, has been run at Hornty Park on the all-weather pitch.</p> <p>The remaining funding allocation in the project is being used to provide match funding towards other partnership bids, which will be made in Q2 17/18, targeted at getting people active in Hastings and Rother.</p>																				
<p>People Experiencing Health Inequalities</p>	<p><b>Community Adult Learning</b></p> <p>Sussex Coast College Hastings is leading a project in partnership with the CCG and HBC, to provide bespoke and targeted adult community learning for vulnerable people in Hastings and St Leonards. The theme of the project is to address residents' mental health and wellbeing through alternative and targeted education, which is being supported by learning champions. The project is focused on the top 1%, 10% and 20% deprived wards in Hastings and St Leonards. Beneficiaries will include lone parents, people with poor physical and / or mental health, care leavers, the long term unemployed and the Black, Asian and minority ethnic community. The 2yr project aims to support 200 learners (in five tranches of 40 people). Delivery is being achieved via community partners, which include EFT (Education Futures Trust), FSN (Fellowship of St Nicholas), Horizons CIG and HFS (Hastings Furniture Service).</p>	<p>20 courses of 10 weeks each are being delivered, for example, on Family Learning (English and Maths), Arts, Craft, Furniture Restoration, Cooking &amp; Healthy lifestyle, ICT and digital inclusion, Health &amp; Wellbeing, Confidence Building, Personal Development, Employability, Parenting and English for Speakers of Other Languages (ESOL).</p> <p>These commenced in April 2016 and run during normal term time. Community partners have now completed delivery of two tranches (out of five). Currently 81 residents have engaged with the programme, which is one above the 80 resident target at this point. Recruitment to the courses is as follows:</p> <table border="1" data-bbox="913 986 1547 1214"> <thead> <tr> <th><u>Partner</u></th> <th><u>Course</u></th> <th><u>Learner Starts</u></th> </tr> </thead> <tbody> <tr> <td>EFT</td> <td>Without walls</td> <td>34</td> </tr> <tr> <td>FSN</td> <td>Build a Happier You</td> <td>37</td> </tr> <tr> <td>Horizons</td> <td>ESOL Health &amp; Wellbeing</td> <td>37</td> </tr> <tr> <td>HFS</td> <td>Furniture Restoration</td> <td>11</td> </tr> <tr> <td>Overall</td> <td></td> <td>119</td> </tr> </tbody> </table> <p>69% (56) of learners, from the first two tranches, have successfully completed their courses.</p> <p>52% (42) of residents engaged with come from the top 20% deprived wards. Residents from wards within the top 1% are proving to be the most difficult to engage, representing 5% of</p>	<u>Partner</u>	<u>Course</u>	<u>Learner Starts</u>	EFT	Without walls	34	FSN	Build a Happier You	37	Horizons	ESOL Health & Wellbeing	37	HFS	Furniture Restoration	11	Overall		119	<p>Sussex Coast College Hastings</p>	<p>Green</p>
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		<p>learners at this stage.</p> <p>The impact of courses on residents' mental health and wellbeing is monitored using the Warwick-Edinburgh Mental Wellbeing scale<sup>1</sup>. Snapshots are taken at the course start and course end to monitor the impact the learning and learning champion's support are having on the learner's mental health and well-being. The early results from Tranche 1 and 2 are clearly demonstrating a positive impact.</p> <p>Progress to date suggests that participant numbers are likely to exceed the overall target of 200. Courses are due to finish with a celebratory event in January 2018. However, discussions are taking place with the CCG to extend this project by a further cohort running from January to April 2018 (circa £12k).</p> <p>For both Tranches a majority of residents were engaged either by the partners, word of mouth and/or other sources. Early indications show that referrals are predominantly coming from the local NHS but not from GPs. This is something the partnership will address for further tranches via marketing and continued face to face contact with GP practices.</p>		
	<p><b>Health Independent Domestic Violence Adviser (HIDVA)</b></p> <p>A one year pilot project that will embed an Independent Domestic Violence Advisor (IDVA) at ESHT's Conquest Hospital, in the A&amp;E department and (where appropriate) other delivery options, for example, the Maternity Unit. The service will promote earlier identification of domestic violence and abuse (DVA) and seek to link all clients assessed as medium or high risk with IDVA services in Hastings for further support and advice. The project will also deliver training for A&amp;E and other hospital staff at short awareness raising sessions to help promote</p>	<p>The project began in September 2016. However, there were unexpected delays with co-locating the IDVA in ESHT because of challenges in securing an honorary contract. This delay meant that the front line worker was unable to be co-located until 07/11/16. There was therefore a delay in direct case work. Since January 2017 the IDVA has been co-located at A&amp;E, which has improved client engagement.</p> <p>Bespoke resources for the hospital, including ward resources and publicity material, are available including 'The Portal' posters, business cards, amber cards and disguised materials (tissue format).</p> <p>A programme for engagement with professionals / wards, focused on Acute Assessment Unit, A&amp;E and Maternity, is also in place. The IDVA is now delivering monthly Level 3 Safeguarding training</p>	Change, Grow, Live - CGL (formerly CRI)	Amber

<sup>1</sup> <http://www.healthscotland.com/scotlands-health/population/Measuring-positive-mental-health.aspx>

Thematic Area	Project Description	Summary of Progress at 31 March 2017	Delivery Lead	Status
	<p>their capacity to talk about DVA with their patients.</p>	<p>sessions in order to embed the service offer.</p> <p>An improvement Action Plan has been agreed, with revised targets to reflect the delayed start to the project. This is having a positive impact, with 4 referrals in Q3 and 18 in Q4 2016/17.</p> <p>It is of note that recommendations relating to IDVA provision have been made in Domestic Homicide Reviews being concluded in East Sussex into the deaths of Adult E and F. These reports, including the recommendations and findings underpinning them relating to IDVA provision, have been signed off by the Safer Communities Board. They will be shared with CCGs in East Sussex for further consideration.</p>		
	<p><b>Identification and Referral to Improve Safety (IRIS)</b></p> <p>A one year pilot IRIS scheme to help address the high level of DVA in Hastings &amp; St Leonards. The project will draw on good practice developed by the national IRIS programme. Through the appointment of an advocate-educator, IRIS provides an opportunity to develop existing partnership work between primary care and specialist DVA services by providing all 19 GP practices in Hastings with a practice based training, support and referral programme for staff.</p> <p>IRIS promotes the capacity of primary care clinicians and their patients to talk about DVA, enabling general practice to play an essential role in preventing and responding to DVA by intervening early, providing treatment and information, and referring victims on to specialist services. This will help make patients safer and enable more families to stay safely in their own homes.</p>	<p>The IRIS project began in September 2016. A comprehensive briefing pack has been developed which has enabled a consistent approach and launch of the project via the CCG. Benefits achieved include easier access to GP Practices and higher level of engagement between Practice Managers and Adult Safeguarding Leads and the IRIS AE and Clinical Lead.</p> <p>A range of engagement events have been completed. In Q3 and Q4 16/17, staff in 8 GP practices have been trained which has resulted in 11 referrals.</p>	<p>Change, Grow, Live - CGL (formerly CRI)</p>	<p>Amber</p>

Thematic Area	Project Description	Summary of Progress at 31 March 2017	Delivery Lead	Status
Community Health & Wellbeing Centres	<p><b>Engagement &amp; Consultation</b></p> <p>In December 2015 '2020 Delivery' were appointed to deliver the community engagement and consultation project to produce options for the development of Health and Wellbeing Centres in Hastings, St Leonards and Bexhill (Bexhill Central and Sidley).</p>	<p>The final report was produced in April 2016 and in May 2016 the CCG approved the four recommended initiatives from the report. All four initiatives focus on delivering health and wellbeing services in existing centres in the most deprived wards of the towns, as follows:</p> <ol style="list-style-type: none"> <li>1. Sustainability partnerships within existing community centres</li> <li>2. Expanded system of social prescribing</li> <li>3. Prevention services in existing community centres</li> <li>4. Integrating voluntary and community services into planned expansions of GP practices</li> </ol> <p>The CCG and HBC have provided feedback to stakeholders including communities and individuals engaged in the consultation process. All four initiatives have varying implementation timescales and were progressed in 2016/17 by the multi-agency project management group.</p>	HBC - Regeneration	Green
	<p><b>Invest to implement outcomes of consultation on Health and Wellbeing Centres</b></p> <p>This project delivers Initiative 1 identified in the report on consultation and engagement. It supports development and maintenance of Health and Wellbeing Community Hubs in the six most deprived locations of Hastings and Bexhill, based on existing community facilities. Grant funding over a three year period will support the costs of infrastructure and systems development; leadership, staff and volunteer training; improvement of management, financial control and income generation capacity; small items of equipment or small scale refurbishment or modification; and to fund professional community centre</p>	<p>The project management group overseeing this work stream includes representatives from the CCG, HBC, RDC, ESCC, HVA and RVA. A business case for the implementation of this Initiative received CCG approval for investment of £1,292,500 over a three year period - 2017/18 to 2019/20 to establish six health and wellbeing hubs in the ten most deprived wards of Hastings, St Leonards, Bexhill and Sidley.</p> <p>The supporting 'Health and Wellbeing Community Hubs Grant Fund', which is specifically for local voluntary and community sector organisations, was successfully launched on 9th January 2017. It aims to:</p> <ul style="list-style-type: none"> <li>• Establish health and wellbeing community hubs in the six communities of: <ul style="list-style-type: none"> <li>- North West St Leonards, which includes Hollington and Wishing Tree wards</li> <li>- Central St Leonards, which includes Central St Leonards and</li> </ul> </li> </ul>	HBC - Regeneration	Green

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	<p>development workers.</p> <p>The investment is specifically not for the direct delivery of health and wellbeing services, but to develop and make sustainable beyond the three year funding period Hubs and organisations able to play a full role as health and care provision evolves. Funding will be channelled through two projects: 1) That will provide grants to well established, stable community groups/centres which put forward compelling plans to use the funds to secure and build on their existing strengths and partnerships. 2) That will support work to identify local organisations and centres, which are at present less well established but have the potential and motivation to develop a significant health and wellbeing role.</p>	<p>Gensing wards</p> <ul style="list-style-type: none"> <li>- Hastings Town Centre, which includes Castle ward</li> <li>- North East Hastings, which includes Ore, Baird and Tressell wards</li> <li>- North East Bexhill, which includes Sidley ward</li> <li>- Central Bexhill, which includes Central Bexhill ward</li> </ul> <ul style="list-style-type: none"> <li>• Secure and sustain the capacity and capabilities of existing community hubs and organisations to deliver health and wellbeing services.</li> <li>• Enable individuals and communities to gain more control over their health and wellbeing.</li> </ul> <p>It is anticipated that applications will be submitted by voluntary and community sector organisations for grants of up to £150,000 across the three-year fund period. The application process is in two stages and awards will be made so that projects can commence from July 2017 onwards. The Fund will support the costs of:</p> <ul style="list-style-type: none"> <li>• Infrastructure and systems management – for example enhancing the effectiveness of policies, processes, data and information collection and information technology.</li> <li>• Leadership development - for example developing high quality leadership and governance to improve the quality of services.</li> <li>• Staff and volunteer training – for example embedding effective practices to recruit and support staff and volunteers.</li> <li>• Financial planning and income generation – for example identifying and accessing a variety of sources and types of income.</li> <li>• Small items of equipment and / or small scale refurbishment with a value up to 10% of the total grant.</li> <li>• Actively contributing to a network of community hubs that will design and develop health and wellbeing services.</li> </ul>		

Thematic Area	Project Description	Summary of Progress at 31 March 2017	Delivery Lead	Status
		<ul style="list-style-type: none"> <li>• Collaborative working and innovation.</li> </ul> <p>Details of the application and decision making processes are as follows. The application process is in two stages.</p> <p>Stage 1 - Submission of an Expression of Interest (EOI), which checks eligibility and captures a project's information, so that an initial assessment can be made.</p> <p>Stage 2 - Submission of a Full Application which details who will contribute to the project's development, how the project will be promoted, implementation and its financial requirements.</p> <p>Stages 1 and 2 will be assessed by a panel, which includes representatives from the CCG, Hastings Borough Council, Rother District Council, East Sussex County Council and the local voluntary and community sector.</p> <p>The panel will assess each application to ensure eligibility for funding and will make recommendations to the CCG for approval.</p> <p>All applications will be assessed using a scoring system that reflects how well the application demonstrates its ability to achieve the outcomes of the Fund.</p> <p>Expressions of Interest were invited during January 2017. This was followed by development of outline bids for submission during April 2017 to be followed by workshop support for submission of full applications. A final decision on successful bids for successful bids is planned in July 2017.</p>		
Housing – People and Places	<p><b>Housing &amp; Wellbeing Hub (Street Homeless &amp; Rough Sleeper support)</b></p> <p>This 12 month pilot project strengthens support provided to the rough sleeping and street community through a weekly multi-agency 'hub' approach hosted by Seaview Projects in St Leonards. By adopting a more integrated approach, national evidence suggests that better health</p>	<p>This new service was launched in June 2016. A project board of key partners oversees the Hub and meets regularly to review progress on a quarterly basis.</p> <p>During the first three quarters a total of 93 people have been triaged at the Hub. This has resulted in 249 referrals for a variety of support provided via the Hub or by other agencies. As well as serving as an access point for housing and related services, the Hub has been gathering data relating to the way in which the target group typically engage with primary and secondary health services. Hub attendees</p>	HBC - Housing Needs & Policy	Green

Thematic Area	Project Description	Summary of Progress at 31 March 2017	Delivery Lead	Status
	<p>outcomes and cost savings are achievable.</p> <p>The service is being strengthened with a new post of Navigator who will help people to 'navigate' local support and healthcare services; a dedicated mental health professional (1 morning a week); an activities programme to help individuals change routine; and a housing officer who is a case holder for local rough sleepers and the single point of contact for other agencies. The project provides training for GPs on the support networks and pathways available for homeless people and will also explore whether the Housing First model is viable in Hastings.</p>	<p>have been asked whether they are registered with a GP and whether they have visited A&amp;E within the last 6 months. Of the 68 service users registered with a GP 6 have visited A&amp;E in the last six months (9%). By contrast of the 24 service users <u>not</u> registered with a GP, 17 (71%) had visited A&amp;E in the last six months.</p> <p>The daily activities sessions continue to prove popular. 225 individuals have benefitted from the variety of activities available. The offer of breakfast one morning a week has contributed to the higher than anticipated engagement of people in daily activities. In addition to breakfast, the following activities have proved popular: bingo, pool, computer use, quiz, fishing, board games and art.</p> <p>At present, the Navigator post is working with a complex caseload of six people, developing initial action plans and longer-term support plans. Also, they have trained 40 East Sussex based trainees and GPs and have made contact with 6 GP practices and are exploring further staff training opportunities.</p> <p>The project is performing well and generally meeting or exceeding outcome targets. At the end of Q3, for example, housing solutions were achieved for 47 rough sleepers against a 12 month target of 30; and 46 people were assisted to access health care service interventions as part of a holistic action plan against the full year target of 40. Early results from a review of service user perceptions relating to their housing, health and well-being suggest a trend of improvement in all areas.</p> <p>Monitoring has identified that the Hub is supporting a lower than expected number of young people (18-25 years). The specialist rough sleeper housing officer has been operating a weekly outreach service at XTrax during Q4. The intention has been to understand whether the lower level of attendees to the Hub among under 25s can be explained by their attending XTrax in preference to Seaview. It has been established that while there were a significant number of insecurely housed young people accessing XTrax during Q4 there were no rough sleepers identified. The rough sleeper coordinator continues to work closely with XTrax staff, and remains a direct point of referral for young people experiencing rough</p>		

Thematic Area	Project Description	Summary of Progress at 31 March 2017	Delivery Lead	Status
		<p>sleeping and needing to access the Hub service network.</p> <p>In addition, a number of recent cases involving women have highlighted the lack of specialist domestic violence knowledge within the network of Hub services. The IDVA service has, therefore, agreed to provide a rapid response to Hub enquiries when needed.</p> <p>Development of the Hub model in Hastings has helped secure National Government funding for additional homelessness and rough sleeping prevention measures between 2017 and March 2019.</p>		
	<p><b>Healthy Homes –Homelessness Support (Hospital Pathway)</b></p> <p>An 18 month pilot project to support people who are homeless or otherwise unsuitably housed when discharged from hospital. The objective is to improve housing outcomes after discharge, as a result reducing delays in discharging patients and reducing hospital readmission rates. Building on best practice elsewhere a multi-disciplinary health and housing team is envisaged to provide hospital and community based support.,.</p>	<p>In 2016/17, the project has been intensively scoped with relevant strategic and operational statutory and voluntary and community sector partners using the national evidence base and local best practice.</p> <p>For example, the Hastings LSP and the Safer Hastings and Rother Partnership has considered relevant issues, including the impact of harms caused by alcohol and / or drugs, with the aim of developing a co-ordinated support and enforcement response to the current rise in rough sleeping and street related activities.</p> <p>In March 2017, a successful HBC led workshop was held for local service providers that has resulted in establishing the Hastings Street Community Partnership. It has commenced promoting and supporting local organisations to collaborate and work together closely, in order to design and deliver services that are co-ordinated, effective and which enhance their collective impact.</p> <p>A needs assessment has been completed, consisting of a structured review of patient data about homeless people, to understand the numbers and types of homeless patients being admitted to the Conquest Hospital. Alongside this local authority, NHS and voluntary sector community based services have been mapped.</p> <p>The final scope of project will be agreed in July 2017 by multi</p>	HBC Housing Needs & Policy	Red

Thematic Area	Project Description	Summary of Progress at 31 March 2017	Delivery Lead	Status
		agency partners with a business case to be reviewed for approval by CCG in September 2017. Implementation will commence in Q3 2017/18.		
	<p><b>Healthy Homes – Places</b></p> <p>This programme is an 18 month pilot targeted at poor condition properties in the private sector (owner-occupiers and private tenants) where fuel poverty is an issue due to unsatisfactory heating, poor thermal insulation and generally poor energy efficiency.</p> <p>The pilot comprises two key initiatives:</p> <ol style="list-style-type: none"> <li>1. Major Measures - Providing financial support to help reduce fuel poverty in owner-occupied and private rented homes</li> <li>2. Poor Conditions in Private Rented Homes - Supporting the enforcement of housing standards in private rented homes</li> </ol> <p>The aim of the programme is to focus on the most disadvantaged wards in Hastings and Rother with the highest percentage of fuel poor households, in order to achieve the biggest impact on reducing health inequalities. The programme will complement delivery of the ESCC Winter Home Check Service by providing top up funding for vulnerable residents in the 6 most disadvantaged wards in Hastings and Rother with major heating and insulation measures.</p> <p>The programme will also target</p>	<p>The Major Measures initiative commenced in mid-November 2016 with a total budget of £481k and will be delivered until 31<sup>st</sup> March 2018. The project target is to assist 148 households over this period. Properties in the following six wards – Braybrooke, Castle, Central St Leonards, Gensing, Old Hastings and Bexhill Central – meeting the eligibility criteria, have priority for major measures.</p> <p>Progress from Nov 2016 – March 2017 shows:</p> <ul style="list-style-type: none"> <li>• 51 homes assisted with a major measure installation</li> <li>• Castle Ward has had the highest number of major measure installations at 11 homes</li> <li>• Central St Leonards Ward has benefitted from investment of approximately £31,000, the most to date for any single ward</li> <li>• Investment by tenure – Private landlords have received 47% and owner-occupiers have received 53%</li> <li>• Major measure installations by type: Central Heating Boiler– 78% Full Central Heating System – 10% Loft Insulation – 8% Storage Heaters – 4%</li> </ul> <p>Despite the initiative starting later than planned, at the end of March 2017, £157k was spent on completed installations against a target of £145k for 2016/17.</p> <p>The Improving Private Rented Homes initiative commenced in November 2016 and will continue until 31<sup>st</sup> March 2018. Currently, it is prioritised in Central St Leonards ward where conditions in private rented homes are poorest. At the end of March 2017 inspections had been carried out of 56 homes and 8 properties had been improved through enforcement action. Approximately £22,000 was invested in this initiative in 2016/17.</p> <p>During Q4 the status of the project in Rother was agreed. Following</p>	HBC - Housing Renewal	Green

Thematic Area	Project Description	Summary of Progress at 31 March 2017	Delivery Lead	Status
	<p>concentrations of poor condition private rented homes in these areas, where tenants are fuel poor, with proactive inspections and follow up action to secure improvements, including enforcement of housing standards, where necessary.</p>	<p>the preliminary results of the Rother Private Sector House Condition Survey, which shows property standards decreasing in Bexhill, it has been decided to focus from April 2017 the project at Bexhill Central Ward.</p>		
<p>Programme Support</p>	<p><b>Programme Management &amp; Project Development</b> HBC central support and other costs associated with management, development, performance reporting and support for the programme.</p>	<p>A consistent approach to project development and delivery and programme management is being achieved, with support for development of business cases for specific projects, where necessary, and performance management. There is considerable input from HBC management and central support services such as Legal and Finance to ensure effective delivery of the programme.</p>	<p>HBC</p>	<p>Green</p>

## Appendix 2

### Healthy Hastings & Rother Programme Hastings Borough Council Led Projects – 2015-2017 Spend @ 31 March 2017

	A	B	C	D	
Project	CCG s.256 Allocation 2015 - 2016	2015-16 Spend	2016-17 Spend	Total Spend 2015-2017 (B + C)	Carry Forward to 2017-18 (A - D)
Community Adult Learning	£57,600		£57,600	£57,600	£0
Health & Wellbeing Centres - Consultation	£147,000	£91,231	£55,769	£147,000	£0
Health & Wellbeing Centres - Implementation	£400,000				£400,000
Let's Get Moving	£73,400	£5,000	£28,822	£33,822	£39,578
IDVA Domestic Violence	£49,803		£29,052	£29,052	£20,751
IRIS Domestic Violence	£69,994		£41,001	£41,001	£28,993
Street Community - Health & Wellbeing Hub	£162,747	£4,096	£84,830	£88,926	£26,074
Homelessness Support (Hospital Pathway)	£152,253				£152,253
Healthy Homes - Places (Fuel Poverty)	£627,000		£194,004	£194,004	£432,996
HBC Programme Management	£62,203	£6,263	£44,737	£51,000	£11,203
<b>Totals</b>	<b>£1,802,000</b>	£106,590	£535,815	<b>£642,405</b>	<b>£1,159,595</b>

<b>Appendix 3</b>							
<b>Healthy Hastings &amp; Rother Programme Hastings Borough Council Led Projects - 2017-2020 Additional CCG Allocations and Forecast Expenditure</b>							
	A	B	C	D	E	F	
<b>Project</b>	<b>Spend @ 31 March 2017</b>	<b>Carry Forward to 2017-18</b>	<b>Additional Allocation 2017-18</b>	<b>Additional Allocation 2018-19</b>	<b>Additional Allocation 2019-20</b>	<b>Total Additional Allocation (C+D+E)</b>	<b>Total Project Value (A+B+F)</b>
Community Adult Learning	£57,600	£0	£13,950	£41,850	£0	£55,800	£113,400
Health & Wellbeing Centres - Consultation	£147,000	£0	£0	£0	£0	£0	£147,000
Health & Wellbeing Centres - Implementation	£0	£400,000	£12,500	£440,000	£440,000	£892,500	£1,292,500
Let's Get Moving	£33,822	£39,578	£0	£0	£0	£0	£73,400
IDVA Domestic Violence	£29,052	£20,751	£29,052	£50,000	£0	£79,052	£128,855
IRIS Domestic Violence	£41,001	£28,993	£41,001	£70,000	£0	£111,001	£180,995
Street Community - Health & Wellbeing Hub	£88,926	£73,821	£0	£0	£0	£0	£162,747
Homelessness Support (Hospital Pathway)	£0	£152,253	£0	£300,000	£0	£300,000	£452,253
Healthy Homes - Places (Fuel Poverty)	£194,004	£432,996	£0	£200,000	£0	£200,000	£827,000
HBC Programme Management	£51,000	£11,203	£11,249	£44,074	£17,600	£72,923	£135,126
<b>Totals</b>	<b>£642,405</b>	<b>£1,159,595</b>	<b>£107,752</b>	<b>£1,145,924</b>	<b>£457,600</b>	<b>£1,711,276</b>	<b>£3,513,276</b>