

Report to: Cabinet

Date of Meeting: 8 August 2016

Report Title: Healthy Hastings & Rother Programme -

Reducing Health Inequalities

Report By: Andrew Palmer

Assistant Director (Housing & Built Environment)

Purpose of Report

- To update Members on the delivery of the HBC led projects within the NHS Hastings & Rother Clinical Commissioning Group's (CCG) Healthy Hastings & Rother (HHR) programme in 2015/16
- 2. To note the findings from the Health and Wellbeing Centre(s) Consultation project and to agree the implementation of its associated initiatives
- 3. To seek approval for the development and delivery of HBC led projects within the CCG's HHR programme in 2016/17

Recommendation(s)

- 1. To note progress with the delivery of the HBC led projects within the CCG Healthy Hastings & Rother Programme.
- 2. To note the outcome from the Health and Wellbeing Centre(s) consultation project.
- 3. To agree to implement "Sustainability partnerships within existing community centres" (Initiative 1) in partnership with the CCG.
- 4. To approve the development and delivery of the new projects in 2016/17 as described in the report, within the financial resources available.
- 5. To authorise the Director of Operational Services to take the necessary steps to develop and deliver the projects in consultation with the Deputy Leader.

Reasons for Recommendations

 The Council has long held the position that good health is a key factor in determining the quality of people's lives and that health inequality is a significant outcome of and contributor to poverty.





- 2. If Members approve the projects and initiatives outlined in this report it is necessary to provide the authorisations to allow the development and delivery of the funded projects.
- 3. As public sector budgets reduce it becomes ever more essential for public sector partners to co-operate in addressing issues of exclusion and inequality. This work may help lay the basis for more integrated work in the future.



Introduction

- 1. At its meeting in July 2015 HBC Cabinet agreed to a programme of work with funding from the NHS Hastings & Rother Clinical Commissioning Group (CCG) to help address health inequalities in the town. This report provides an update on the development and delivery of projects during 2015/16 and sets out for approval the proposed HBC and CCG programme for 2016/17. Over the two years the CCG has allocated £1.82m for HBC, the CCG and local partners to invest in projects which address health inequalities through the CCG's Healthy Hastings and Rother (HHR) programme.
- 2. Reducing health inequality is a priority of East Sussex Better Together, which is a joint programme between the local NHS and East Sussex County Council to transform health and social care. The CCG's Governing Body approved an initial investment of £5m in 2015/16 for the HHR programme. This investment has enabled the development of a comprehensive programme comprising in excess of 50 projects. The CCG's Governing Body has subsequently agreed a recurrent budget of £5m per annum for investment in the HHR programme and in March 2016 approved priorities for 2016/17 against an annual investment plan. A booklet published by the CCG summarises the HHR's progress and its key priorities for investment in 2016/17 and is attached for information.

HBC and CCG - 2015/16 Programme Update

- 3. Projects with an overall value of £602k were developed in 2015/16 to reflect a number of key thematic areas:
 - Preventing III health
 - People Experiencing Health Inequalities
 - Health and Wellbeing Centre(s)
 - Housing People & Places
- 4. The projects 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; the strengthening of housing and support services for rough sleepers and the street community; and strengthening the Winter Home Check Service with financial support for 'major' heating and insulation measures for eligible people. Details are attached at Appendix 1. For the most part projects were developed during 2015 for implementation during 2016/17, the exception being the health and wellbeing centres consultation work, which completed in April 2016.





Health and Wellbeing Centres

- 5. HBC appointed '2020 Delivery' in December 2015, to undertake a community engagement and consultation project on the development of Health and Wellbeing Centre(s) in Hastings, St Leonards and Bexhill (Bexhill Central and Sidley). The end of project report was produced in April 2016. In May 2016 the CCG Governing Body approved the four initiatives recommended in the report, which are:
 - 1. Sustainability support to existing community centres
 - 2. Expanded system of social prescribing
 - 3. Prevention services within existing community centres
 - 4. Integrating voluntary and community services into planned expansions of GP practices

Commissioning and project management models for all four initiatives will be developed and implemented within an overall indicative budget of £300k per annum.

- 6. The four initiatives focus on the most deprived geographical wards in Hastings, St Leonards and Bexhill. A summary of the end of project report is attached at Appendix 2. Feedback on the findings from the project is being provided by the CCG and HBC to local stakeholders including communities and individuals in June 2016. The CCG has proposed that commissioning and project management models for implementing Initiative 1 (Sustainability support to existing community centres) is developed and agreed between the CCG and HBC by the end of July 2016 for implementation from September 2016.
- 7. Initiatives 2, 3 and 4 are being taken forward by the CCG in collaboration with East Sussex County Council and other partners. The CCG's oversight will therefore enable interdependencies to be maximised between the four initiatives.

HBC and CCG Proposed 2016/17 Programme

- 8. The programme proposed for 2016/17 is supported by CCG funding of £1.2m. Experience from initiating the programme in 2015/16 has highlighted the need to focus resources on developing fewer but larger scale projects. With this in mind the there are three key strands to the 2016/17 programme:
 - Health & Wellbeing Centres
 - Healthy Homes People
 - Healthy Homes Places

The programme is designed to address health inequalities in the most deprived parts of Hastings, St Leonards and Bexhill. A summary of projects within the programme is set out below.

9.

Proposed Programme 2016-2017





Theme	Project Description	Budget
Health & Wellbeing	Implementation of Initiative 1 –	
Centres	sustainability support to existing	£300,000
	community centres.	
	Provision of financial resources and	
	support for the continued	
	development of capacity within	
	existing community centres. This	
	would enable the sustained delivery	
	of new and existing services that	
	contribute to the health and	
	wellbeing of people using the	
	centres and services.	
	The support	
	envisaged could	
	include grants	
	awarded to	
	established centres in	
	deprived wards that	
	have the capacity to	
	provide access to a	
	wide variety of	
	services and that are	
	able to have the	
	biggest impact on	
	health inequalities.	
	Total grants are to be	
	agreed and	
	anticipated to be up to	
	a maximum of £50k	
	per centre with a total	
	budget of £150k per	
	annum over three	
	years.	
	Support for other	
	centres could include	
	capacity building and	
	co-designed projects	
	to address health	
	inequalities, achieved	
	through peer-to-peer	
	support and	
	development of	
	shared resources via	
	a local forum.	
	Budgets will be	
	agreed to build	
	capacity and to	
	provide grants for	
	specific co-designed	
	projects. Further	
	development of	
	commissioning plans	
	for Initiatives 2, 3 & 4	
	during 2016.	



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Healthy Homes - People	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, with a budget for temporary accommodation and minor property adaptations. Discussions are currently taking place between HBC, RDC, CCG, ESCC and the hospital/health trusts to ensure the project aligns with the objectives of East Sussex Better Together and those of the individual organisations. It is also necessary to gather base data and map data collection across different agencies in order to help inform project development. This stage is expected to require three months, leading to main project implementation in Q4.	£552,000
Healthy	An 18 month pilot	£552,000
Homes - Places	project targeted at poor condition properties in the private sector (owner-	



Total		£1,200,000
	support for the programme.	
Support	management and central service	
HBC Programme	Contribution towards HBC	£48,000
	properties.	
	private rented	
	improvements in	
	priority to secure	
	fuel poverty is a	
	other wards where	
	the Coastal Space renewal area and	
	enforcement action in	
	b) Taking	
	Check Service.	
	add value to the East Sussex Winter Home	
	measures. This will	
	energy efficiency	
	for major heating and	
	by additional funding	
	Reduction programme	
	Sussex Fuel Poverty	
	a) Extending the reach of the East	
	envisaged:	
	elements are	
	problems. Two complementary	
	energy efficiency	
	insulation and general	
	heating, poor thermal	
	due to unsatisfactory	
	poverty is a concern	
	occupiers and private tenants) where fuel	

- 10. The implementation work on Health and Wellbeing Centres already has the necessary approvals to proceed. Business cases are required for the Healthy Homes People and Places projects. The Places theme business case was finalised in July and received CCG approval on 21 July. Following Cabinet consideration of the overall programme set out in this report, the Places theme business case will require HBC approval. The project launch is anticipated in early October 2016. A detailed business case for the People theme will be created in collaboration with stakeholders and will be finalised once the initial 'mapping' phase is concluded. Currently, it is anticipated that the business case will be brought forward for respective approvals by October 2016. HBC approval for business cases will be made in conjunction with the Deputy Leader who is acting as Lead Member for this work.
- 11. Individual project management costs will be included within the funding available for each theme. For the Health and Wellbeing Centres work it is





proposed to charge an HBC project management fee of 10% against the cost of implementing Initiative 1. The project management costs for the Housing - Places theme are included in the business case. Project management costs for the People theme will be agreed between the CCG and HBC when the business case is finalised. In addition there is a budget of £48,000 to contribute towards HBC costs associated with supporting the development and delivery of the programme.

12. The CCG has allocated £300k per annum over three years to support the implementation of the Health and Wellbeing Centres programme. The Healthy Homes themes projects will straddle this financial year and next and it is possible to carry forward the CCG funding into future years to support this. Where existing or proposed pilot projects prove to be successful in delivering the desired health and other outcomes there may be the opportunity to bid for continuation funding from the overall CCG Healthy Hastings and Rother programme budget in future years.

Policy Implications

- 13. If successful, projects within the programme should begin to reduce health inequalities and impact positively on:
 - a) Reduced health inequalities should contribute towards greater community cohesion and sustainability. Health issues are a significant cause of exclusion and impose significant problems at a personal and community level.
 - b) Crime and fear of crime, particularly on issues of domestic violence.
 - c) Local people's views, particularly through work around consultation and engagement on the delivery of health and wellbeing services in community centres
 - d) 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 additional resources allocated by the CCG, currently £1.2m. Project delivery will straddle this financial year and next. There is flexibility with the CCG funding, which can be carried forward into future years to support this.
- 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 £48,000 to contribute towards HBC management and central support costs associated with developing and delivering this programme.





Wards Affected

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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 and wellbeing - Spring 2016

Appendices

- 1. Healthy Hastings & Rother Programme 2015-2016: HBC Led Projects
- 2. Summary of Health & Wellbeing Centres Consultation Report April 2016

Background Papers

Report to Cabinet – Reducing Health Inequalities – 6 July 2015

Officer to Contact

Andrew Palmer apalmer@hastings.gov.uk 01424 451316





Appendix 1 Healthy Hastings & Rother Programme 2015-2016 Projects Led by HBC

Thematic	Project	Project Summary	Value	Delivery
Area				Lead
Preventing III Health	Lets Get Moving	Active Hastings are leading this project with support from UK Active, the commissioned training provider. 9 GP Practices in Hastings have signed up to deliver Lets Get Moving. Training is being rolled out to those practices over the Summer period. Delivery of advice, support and referral into physical activity programmes will be available from Active Hastings, Freedom Leisure and their associated partners from September. Widespread promotion of the project through local stakeholder meetings and local communication conduits are proactively supporting the opportunities for referrals to be generated. Optimum numbers of referrals are being negotiated with practices over the 2 year project period. Priority remains focused on those patients who are overweight and in-active in line with the Active Hastings Sport and Physical Activity Strategy.	£73,400	HBC – Active Hastings



People	Adult Learning	Sussex Downs College is leading a project in partnership with	£57,600	South Coast
Experiencing	_	the CCG and HBC, to provide bespoke and targeted adult		College
Health		community learning for vulnerable people in Hastings and St		_
Inequalities		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 will support 200 learners. 20		
		courses of 10 weeks each will be delivered, for example, on		
		Family Learning (English and Maths), Arts, Craft, Restoration,		
		Cooking & Healthy lifestyle, ICT and digital inclusion, Health &		
		Wellbeing, Confidence Building, Personal Development,		
		Employability, Parenting and English for Speakers of Other		
		Languages (ESOL). The courses commenced in April 2016		
		with evaluation data scheduled in early July.		



Health Independent Domestic Violence Adviser (IDVA)	A one year pilot project that will embed an Independent Domestic Violence Advisor (IDVA) at the Conquest Hospital, in the A&E department and (where appropriate) other delivery options, for example, the Maternity Unit. The proposed service will 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&E and other hospital staff at short awareness raising sessions. Whilst the main focus of the proposed hospital based IDVA is in supporting vulnerable women and girls, the project will adopt a gender specific approach and be open to men/boys presenting at A&E as a result of being in an abusive/violent relationship. The IDVA will promote earlier identification, as well as enabling access by patients in this setting to the wider specialist domestic violence services that have recently been commissioned in Brighton & Hove and East Sussex. The IDVA service will help promote the capacity of primary	£50,000	Change, Grow, Live (formerly CRI)
	care practitioners and their patients to talk about domestic violence and abuse (DVA), enabling hospital staff to play an essential role in preventing and responding to DVA by intervening early, providing treatment and information, and referring victims on to specialist caseworkers or other support. Under joint commissioning arrangements between ESCC, HBC and Brighton & Hove City Council, this project and the IRIS scheme (below) are being delivered by 'Change, Grow, Live' the commissioned provider of domestic violence services across East Sussex. The service is currently mobilising and will commence delivery in June 2016.		
Identification and Referral to Improve Safety (IRIS)	A one year pilot IRIS scheme to help address the high level of DVA in Hastings & 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	£70,000	Change, Grow, Live (formerly CRI)



		primary care and specialist DVA services by providing all 19 GP surgeries in the town with a practice based training, support and referral programme for staff. The aim is to deliver a care pathway for adult patients living with abuse and their children. It is aimed at women who are experiencing DVA from a current partner, ex-partner or adult family member. IRIS also provides information and signposting for male victims and for perpetrators. Significantly, IRIS is an opportunity to deliver care closer to patients' homes where it is safe and appropriate to do so. 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. The service is currently mobilising and will commence delivery in June 2016.		
Community health & wellbeing centres	Engagement & Consultation	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. The final report was produced in April 2016. All the recommended options focus on delivering health and wellbeing services in existing centres (yet to be determined) in the most deprived wards of the towns. A project management group is overseeing this work stream and includes representatives from the CCG, HBC, RDC, ESCC, HVA and RVA. Feedback on the report's findings from the consultation is being provided by the CCG and HBC to stakeholders including communities and individuals engaged in the consultation process. All four options/interventions are being progressed in 2016/17.	£150,000	HBC - Regeneration



Housing – People and Places	Housing & Wellbeing Hub (Street Homeless & Rough Sleeper support)	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 outcomes and cost savings are achievable. 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 will be the case holder for local rough sleepers and the single point of contact for other agencies. The project will provide training for GPs on the	£115,000	HBC - Housing Needs & Policy
		agencies. The project will provide training for GPs on the support networks and pathways available for homeless people. It will also explore whether the Housing First model is viable in Hastings. The housing officer will also		
		undertake a Health Needs Audit to establish an evidence base about the health of homeless people in the town. Commissioning of the various project elements has taken place over the past few months and the new service was launched on 9 June 2016.		



Programme Support	Cold/Damp/Homes, Trips and Falls Programme Management & Project	A project is under development to extend the reach of the East Sussex Fuel Poverty Reduction programme by providing additional funding for major heating and energy efficiency measures. It will complement the Winter Home Check Service by providing up to £4,000 top up for major measures to address fuel poverty and potential slips and falls for vulnerable people living in poor quality private homes. The project development work has helped inform the Healthy Homes – Places theme proposed for 2016/17 and the funding will be rolled forward and added to the budget for this. Development of a consistent approach to project development and delivery and programme management. Support for	£75,000	HBC - Housing Renewal
Support	Development & Project Development	development of business cases for specific projects.		ПВС
Total Budget			£602,000	

