

**Report to:** Cabinet

**Date of Meeting:** 6 November 2017

**Report Title:** Healthy Hastings & Rother Programme

**Report By:** Andrew Palmer  
Assistant Director - Housing & Built Environment

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### **Purpose of Report**

1. To advise Members on proposed changes to funding allocations for the Hastings Borough Council (HBC) led projects within the NHS Hastings & Rother Clinical Commissioning Group's (CCG) Healthy Hastings & Rother (HHR) programme.
2. To seek Cabinet agreement for the revised programme and the arrangements for ensuring delivery of projects during 2017/18 and beyond. Insert an outline of the report's purpose - whether it is for information or whether a decision needs to be made

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### **Recommendation(s)**

Recommendations:

1. To note the proposed changes to funding allocations in 2017 to 2020 for HBC led projects within the CCG's Healthy Hastings & Rother Programme.
2. To agree the revised programme of HBC led projects as described in the report, within the total financial resources available from the CCG of £3,456,257.
3. To authorise the Director of Operational Services to enter into a revised funding agreement with the CCG under section 256 of the NHS Act 2006 to support the HBC led programme.
4. To authorise the Director of Operational Services to enter into an agreement with Optivo housing association for the funding and delivery of the Co-investment Programme in Ore, Hollington and Sidley.
5. To agree that Cabinet portfolio holders receive quarterly progress reports on the delivery and impact of the programme and that Cabinet receives an annual review of the programme after each financial year end. Insert what is recommended by the author of the report

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### **Reasons for Recommendations**

Insert why the recommendations have been made

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## Introduction

1. Since 2015 the CCG has allocated substantial resources from its Healthy Hastings & Rother Programme, for HBC, East Sussex County Council, and other partners or providers to invest in projects, which will address health inequalities.
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. On 10 July 2017 HBC Cabinet approved further enhancements to the programme with additional CCG funding of £1.711m allocated over the current financial year and the two subsequent financial years until 31 March 2020.
3. Overall Cabinet has approved a programme supported by CCG funding of approximately £3.5m between 2015-2020. Details of the individual projects and progress with delivering them is summarised in the July 2017 Cabinet report.
4. Since the July 2017 Cabinet it has proved necessary to revise funding allocations to certain projects following feasibility work and/or project mobilisation. This report provides a summary of the updated position. The changes will need ratification by Cabinet.

## Report

5. The HBC led programme comprises nine projects at different stages of development and implementation. It has proved necessary to make some adjustments to the programme to reflect the conclusion of feasibility work over the summer in relation to the Homelessness Support – Hospital Pathway project and to address slower than anticipated mobilisation of Phase 1 of the Health and Wellbeing Community Hubs. The programme originally included an allocation of £300k for the Homelessness Support – Hospital Discharge project. However, following feasibility work to establish the project, HBC and CCG colleagues have concluded that the proposed service, which following market testing may include a multi-disciplinary team and specialist nursing service, would be better commissioned directly by the CCG. In addition, slippage on the Health and Wellbeing Community Hubs project will result in spend this year of £229k against an original budget of £400k. Further detail on both projects is contained in Appendix 1.
6. As the CCG require full spend in 2017/18 against the allocated budget these changes release funds to cover the extension of some existing projects without the need for the additional CCG funding originally anticipated this year. The changes will also enable the implementation of a new partnership project: Co-investment Programme in Ore, Hollington, and Sidley designed to reduce health inequalities amongst communities where there are concentrations of people living in housing association homes. Further detail on this new project is contained in Appendix 1. They will also enable an additional £130k to be allocated to the Healthy Homes programme to deliver additional heating improvements and energy efficiency measures for vulnerable households in priority areas.

7. The revised budget position for the programme is attached at Appendix 2. Whilst the total allocation is now £3,456,257, which is £57,019 less than the allocation of £3,513,276 reported to the July 2017 Cabinet (see Appendix 3), it is important to note that the CCG is now intending to directly commission the Homelessness Support – Hospital Pathway project, which is likely to lead to additional investment exceeding £300k over the next two years. Plus, if it proves successful there is the possibility of the project being extended for a further two years with a similar level of investment. To help clarify the position, the variations to the programme and reallocation of funds in 2017/18 are set out at Appendix 4.
8. A further section 256 agreement between the CCG and HBC is required to confirm the availability of additional resources of £1,654,256 to sustain the programme through to 2019/20. This is being drafted in tandem with the Cabinet report so that it is ready for signature by both organisations as soon as possible after the Cabinet meeting. In order to avoid delay in project delivery and to enable the letting of contracts that extend beyond 2017/18 prior to the Cabinet meeting and completion of the section 256 agreement, the CCG has written to HBC to confirm the availability of funds in 2018/19 and 2019/20. Funding for the Co-investment Programme in Ore, Hollington and Sidley will be subject to completion of an appropriate agreement between HBC and Optivo housing association.
9. Now that all projects are at the implementation stage it is proposed that CMG and Cabinet portfolio holders receive quarterly progress reports on the delivery and impact of the programme and that Cabinet receives an annual review of the programme after each financial year end.

## Policy Implications

10. If successful, projects within the programme will contribute to reducing health inequalities and impact positively on:
  - a) Greater community cohesion and sustainability. Poor health outcomes 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
11. Initial results from established projects are generally proving positive. However, it is important to note that only longer term work will produce significant outcomes for local people.

## Financial and Organisational Implications

12. The work programme will need to be contained within the resources allocated by the CCG, currently £3,456,256, including the additional funding of £1,654,256 for 2018-2020. Project delivery will straddle 2017/18 and the next two financial years.

13. 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 be contained within the programme budget and the agreed HBC project management costs will be charged to individual projects. In addition, the programme budget includes an allocation of approximately £133,000 over the five year period (calculated at 4% of the total programme), as a contribution towards HBC management and central support costs associated with developing and delivering this programme.

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### Wards Affected

Ashdown, Baird, Braybrooke, Castle, Central St. Leonards, Conquest, Gensing, Hollington, Maze Hill, Old Hastings, Ore, Silverhill, St. Helens, Tressell, West St. Leonards, Wishing Tree

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### Policy Implications

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

Equalities and Community Cohesiveness	Yes
Crime and Fear of Crime (Section 17)	No
Risk Management	No
Environmental Issues	No
Economic/Financial Implications	No
Human Rights Act	No
Organisational Consequences	No
Local People's Views	Yes
Anti-Poverty	Yes

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### Additional Information

#### Appendices

1. Health & Wellbeing Community Hubs; Homelessness Support; and Co-Investment Programme in Ore, Hollington and Sidley
2. Revised Programme – October 2017
3. Additional Allocations – Cabinet 10 July 2017
4. Variations to Programme – October 2017

#### Background Papers

Report to Cabinet – Healthy Hastings & Rother Programme: HBC Led Projects – 10 July 2017

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### Officer to Contact

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