



City of Westminster

# Adults, Health & Public Protection Policy & Scrutiny Committee

**Date:** 8 May 2017

**Briefing of:** Cabinet Member for Adult Social Services & Public Health

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## **Actions requested by the Committee**

There is no update to the KPI analysis of Adult Social Care (ASC) and Public Health programmes since it was last submitted to the committee. An end of year report is being produced and will be available by the next update.

## **ADULTS**

### **1. Better Care Fund (BCF)**

- 1.1. As of 26<sup>th</sup> April 2017, the Better Care Fund (BCF) planning guidance which was anticipated in November 2016, has not yet been released. The policy framework has however been released and covers two financial years (2017-19) to align with NHS planning timetables and to give areas the opportunity to plan more strategically.
- 1.2. There are a few changes compared to previous years, including a reduction in the number of national conditions and the introduction of the improved Better Care Fund (iBCF) and extra funding for Adult Social Care from the Spring Budget of £2bn over the next 3 years. £1bn of this funding will be available in 2017-18 and will be paid as a DCLG grant direct to councils.
- 1.3. A new national condition has been added for the 2017-19 BCF. All areas must agree a plan to access the iBCF and Spring Budget grant.
- 1.4. All local areas must implement the high impact change model for managing transfer of care, which is also a condition of the iBCF and Spring Budget grant. The plans are to be agreed through a s75 agreement but it does not need NHSE approval.

- 1.5. The proposed 2017/19 BCF plan will build on previously agreed BCF plans, noting the development of the WCC Joint Health and Wellbeing (HWB) Strategy as an important point of reference. There is alignment between the approach to the BCF and the HWB strategy. During BCF preparations, 2016/17 projects have been analysed to determine which projects require further development and which are now embedded as business as usual. Once national guidance is received including conditions and final financial allocations, further planning can take place.

## **2. Home Care and Care Homes**

- 2.1. Of the 1129 customers (15,787 hours), 598 have now transferred to the 4 new commissioned home care providers. 531 customers opted for a Direct Payment in Westminster
- 2.2. Comprehensive bi-monthly contract meetings are being undertaken with all 4 providers, who report on a weekly basis to the Commissioning and Contracts Team. Comprehensive Annual Performance Reviews have been completed for all four providers.
- 2.3. Care home services are also audited on a regular basis and, as necessary, asked to submit improvement plans in response to CQC or audit recommendations.

## **3. Mental Health Day Services Consultation**

- 3.1. Following our joint consultation about changes to our mental health services, officers and health colleagues are continuing to develop a specification for the new service that integrates with secondary and primary care mental health provision within the borough. This is a highly critical service and service users and stakeholders are involved in helping to design the new service. A number of well attended co-design workshops and market days have taken place which have informed the final model. The aim is to reach more people, achieve better outcomes and create efficiencies.
- 3.2. The proposals are to replace underused existing day centres with a more flexible and tailored support service so that there is more of a focus on early intervention and recovery. Assurances have been provided to current service users that no change will be made to current arrangements until other services are in place.
- 3.3. A provider has been appointed to support current service users' transition to a more personalised service and to support any on-going needs. This will include providing peer support groups and "safe space drop-ins". Two drop in services have started – one South of the borough at Abbey Centre currently available one day a week but which is planned to increase, and one North of the borough at the Beethoven Centre which started in April 2017. Services users are also using alternative services from those previously provided within the Recovery Support Services (RSS) day centres. The changes give people increased

choice and control of mental health services accessed through use of personal budgets.

## **Public Health**

### **4. 0-5 Health Visiting and Family Nurse Partnership (FNP)**

- 4.1 The current contract with Central London Community Healthcare (CLCH) runs until 30<sup>th</sup> September 2017. The Health Visiting and FNP services are part of a collaborative commissioning programme and key officers from Public Health, Children's Service Commissioning and procurement teams are working together to re-commission services for children aged 0-5. Conditions of and arrangements for a contract extension for 1 year to allow for continuity of service are being negotiated with the current provider by joint Public Health and Children's Services teams.

### **5. 5-19 School Health Service**

- 5.1 Following a recent competitive procurement Central and North West London NHS Foundation Trust took over the delivery of a new School Health (formerly known as School Nursing service) in Westminster on 1st April 2017. Designed in close co-operation with schools, young people, families, children's services and health staff, the improved service will provide:
- Increased support for transition to primary school
  - A consistent and equitable offer of Relationships and Sex Education
  - School nurses trained up to be Tier 1 mental health workers
  - A confidential drop-in service for young people at all secondary schools
  - As well as accessing their school nurse via drop-in sessions, parents, children and young people will continue to be able to book appointments.

CNWL, CLCH, Public Health and Children's Services have worked closely together to ensure a successful smooth service transition and continuity of care.

### **6. Childhood Obesity**

- 6.1. The Tackling Childhood Obesity Together Programme team (TCOT) is strengthening engagement throughout the Council to establish strong relationships and to target activity to reduce childhood obesity. The TCOT will work with the oral health project to strengthen the message that sugar is harmful.
- 6.2. The family healthy weight services MEND (Mind, Exercise, Nutrition...Do it!) provided by My Time Active are highly rated by residents. A range of fun, interactive and practical sessions to support children and families of different age groups to learn about healthy eating and physical activity is delivered in a variety of settings across the Borough. So far 267 Westminster families are involved in group programmes and 103 families are attending 1 to 1 sessions.

- 6.3. The TCOT team is working with the NHS and City West Homes to design and facilitate My Time Active training for non-clinical workforce members, a GP surgery and to extend provision for families and children to neighbouring estates.

## **7. Community Champions**

- 7.1. The Community Champions has 5 Community Champions projects and a Maternity Champions pilot project. All 5 projects are delivering positive results. There has been good collaborative work with housing, particularly with City West Homes, Peabody and Sanctuary housing. The Queens Park Maternity Champions have regular weekly sessions involving 60 parents and babies.
- 7.2. An extension of the maternity champions project to all 5 projects and a broader reach across the borough is planned and providers have been asked to tender for this work. The project will support expectant parents and parents with children in their first year of life. Outcomes include improved maternal mental health, increased uptake of breastfeeding and immunisations, and improved oral health, as well as reduction in isolation for expectant and new mothers.

## **8. Hoarding**

- 8.1. We have re-launched an innovative approach to tackling hoarding behaviour, helping people who hoard to take back control of the homes before their problems reach crisis point.
- 8.2. Hoarding is becoming a more widely recognised psychological issue, and approximately 2.5% of the population – over 1.2 million people in the UK alone – have some tendency towards hoarding.
- 8.3. Westminster's approach uses a 'Self Neglect and Hoarding' system which we developed in cooperation with a range of partners, including the Royal Borough of Kensington and Chelsea (RBKC). The protocol means people are more likely to get support at an early stage of the disease as mental health, social care, environment health, housing and fire safety professionals are brought together to support people in recognising their problems with clutter and helping them make a new start.
- 8.4. The focus of the work is on building a relationship of trust with the person hoarding, to ensure they can find a long term solution rather than threatening them with penalties that could make their problem worse.

## **9. Oral Health Campaign**

- 9.1. Tooth decay is the leading cause of hospital admission for 1-9 year-old children in Westminster, so the council is exploring ways of making the oral health campaign much more effective.
- 9.2. An event for external stakeholders including school head teachers, dentists, GPs and providers of community dental preventative services took place in the Lord Mayor's Parlour on 15<sup>th</sup> March. The event was very successful with

attendees giving positive feedback and showing significant interest in being a part of the on-going oral health campaign. As a result, further useful contacts have been made and some of the presentations will be given to a head teachers meeting and a school governors meeting.

## **10. Prioritisation Framework**

- 10.1 If the Council is to achieve significant improvements in population health outcomes in the current economic climate, choices need to be made about how best to allocate Public Health resources to specific programmes or work/services. Funding decisions for 18/19 and 19/20 will be informed by the output of a prioritisation framework which will enable the following:
- i. A comparison of services (including existing and proposed services) across a range of dimensions (including health impact; finance; implementation; population coverage and strategic fit);
  - ii. Identification of gaps in service provision for prioritised Public Health outcomes. An assessment of how each borough is performing against each of these priority health outcomes forms another element of the prioritisation framework;
  - iii. Prioritising collaborative programmes of work across Council departments (e.g. obesity prevention, healthy homes etc.)

## **11. Sexual Health**

- 11.1 The re-designed Adults Community Sexual and Reproductive Health Service is now operational following service user meetings to help ensure a smooth transition. The consortium of LOT 1 community support provision is now called "SASH" (Support and Advice for Sexual Health).

## **12. Staff Re-Structure**

- 12.1. Public Health's operating model has been re-designed to ensure the tri-borough can maximise impact on population health whilst also meeting its savings targets for the medium term.
- 12.2. The re-structure (from April 2017) will deliver a new service operating model and culture to provide more visible leadership and governance for each programme of work and a more collaborative model of working with other Council departments, particularly Children's and Adult Social Care.

## **13. Substance Misuse**

- 13.1 Recommendations will be made for future provision following the evaluation of both the specialist Group Work Programme and Primary Care Support Service. Those elements of both programmes shown to have demonstrated positive impact on outcomes will be embedded into the main core provision.

## **14. Tobacco and Shisha**

- 14.1 The new tobacco legislation comes in to force on 21<sup>st</sup> May regarding legal import of tobacco, restrictions on advertising and adequate labelling. Officers will be working with Business Improvement Districts to help get the information out to shisha premises to ensure they understand how to comply with the new legislation.

## **15. Employment Support**

- 15.1. Westminster Employment Service provides tailored support for parents of low income families seeking to enter paid employment, within the pilot 'Parental Employment Programme', Westminster's response to the Child Poverty Joint Strategic Needs Assessment 2014. This showed that 37% of Westminster's children live in poverty. The programme has the following key objectives:

- To improve parents' confidence and to address skills gaps through voluntary work and accredited learning opportunities;
- To ensure employment support is tailored for those with parental responsibilities;
- Working with local businesses, to increase the number of employment opportunities with family-friendly terms and conditions;
- To ensure that information and advice regarding childcare options is clear and accessible for the target group;
- To establish an outreach function to encourage and support families in the target group to engage with the programme.

- 15.2. In the first 18 months, programme activity has included:

- engagement with businesses;
- development of a work stream within the Advisor Academy (for employment advisors), to equip them more effectively to support parents in seek of work;
- the development of the Family Information Service (FIS) to be more readily accessible and navigable;
- the establishment of tailored courses with the programme offered by Westminster Adult Education Service (WAES) with crèche facilities.

- 15.3. There is also activity within Children's Services to deliver the Government's extension of the 2 and 3/4 year old childcare offers and to raise the quality of available child-minding capacity. The programme is funded through the Public Health Investment Fund for a period of three years. Activity commenced in April 2016.

## **16. Health and Wellbeing Board**

- 16.1. The Health and Wellbeing Board met on 23<sup>rd</sup> March and again on 27<sup>th</sup> April in private to plan ways of working together to implement the Health and Wellbeing Strategy 2017-22, which was published on 15<sup>th</sup> December 2016.

- 16.2. A joint implementation plan, which will link the sub-regional Health and Care Transformation work to the local strategy, is now being developed by Westminster City Council and Central London Clinical Commissioning Group (CLCCG) and West London Clinical Commissioning Group (WLCCG). The delivery plan will draw in external partners and providers such as City West Homes and Westminster's Voluntary and Community Sector organisations and will be set out by themes and delivery areas rather than by organisations.
- 16.3. While the Health and Wellbeing Board will have a key role in overseeing the implementation of the entire Health and Wellbeing Strategy, it has identified 3 specific areas which it will focus attention and work collaboratively on during 2017/18. These are:
- Care Coordination;
  - Children, Young People and Prevention; and
  - Mental Health.

## **17. The North West London Sustainability and Transformation Plan**

- 17.1 Following submission of the North West London Sustainability and Transformation Plan which is developing a collaborative approach across 8 boroughs to plan for future demand for health and care services with constrained resources, feedback has now been received from NHS England. Work is now underway to respond to this feedback, refine the plan further and to put in place the arrangements to implement the plan, which is in alignment with Westminster's Health and Wellbeing Strategy. The Council will play a key part in this work and progress will be overseen by the Health and Wellbeing Board.

**If you have any queries about this report or wish to inspect any of the background papers please contact Madeleine Hale x 2621  
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