

Westminster Health & Wellbeing Board

Date:	21 January 2016
Classification:	General Release
Title:	Health and Wellbeing Hubs
Report of:	Liz Bruce, Executive Director of Adult Social Care
Wards Involved:	All
Policy Context:	The Health and Wellbeing Hubs programme was initiated to pilot ways of improving the use of our estate in ways to increase access to preventative services for those at risk of experiencing multiple needs.
Financial Summary:	Not Applicable
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1. Executive Summary

- 1.1 The Health and Wellbeing Hubs programme was initiated to test how best to improve the lives and outcomes of disadvantaged groups and individuals through changing the way we work within the Council and with our partners. The focus is on improving the use of our estates so as to increase access to preventative services for those at risk of experiencing multiple needs. This focus is to prevent the development of complex issues that are costly to individuals, families and public services to resolve. This paper builds on the previous Health and Wellbeing Board paper on this topic considered on 1 October 2015.

2. Key Matters for the Board

- 2.1 The Health and Wellbeing Board is asked to note the plans the Council and partners have started to scope as potential areas of work. The Board is also asked to consider how:
- This programme of work relates to projects currently underway or being planned by partners; and
 - Partners can contribute to the future development of this programme of work.

3. Background

- 3.1 The approach of Health and Wellbeing Hubs is based on public service reform principles around co-location; joint working between multiple sectors and professions to build services around individuals. The overarching mission of the programme is to intervene with high risk cohorts at early stages to prevent them from requiring complex and often costly public services, such as admissions to Accident and Emergency departments or emergency service call outs. We will do this by using existing services but changing the way we work to deliver them, to improve the health and wellbeing outcomes of Westminster residents.
- 3.2 We are currently running two pilot work streams to test out new approaches to improving health and wellbeing outcomes and reducing dependency on public services of older adults and single homeless adults in temporary accommodation.

4. Older People's pilot

- 4.1 The council have four contracts for the provision of preventative services to Older People. These contracts were originally let in 2012 and were extended through a direct letting in June 2015 for the period up to July 2017.
- 4.2 The contracts cover the provision of services at four older people's hubs. These four hubs are located in the wards with the greatest need; Queens Park/ Harrow Road, Westbourne, Churchill and Church Street (Penfold).
- 4.3 A review of the hubs is underway. Early results show:
- Based on the most recent three month period, over 1,400 people are active users of the four hubs, with 9 in 10 living in the borough
 - There are between 6 and 10 attendances associated with each active user over the three months, on average. Those in Churchill Hub appear to be most likely to attend frequently

- Resources appear to be extremely well targeted to older people most in need – 40% of users live in the 20% most deprived parts of WCC, compared with just 3% of users living in the 20% least deprived in the city
- Age: half of attendees aged 60-70, but good reach of older people too
- Attendees are very representative of the ethnic profile of older people in the hub wards
- There are very high levels of satisfaction in the *quality of* sessions across all three hubs, particularly Churchill (based on the three Open Age hubs where satisfaction is routinely monitored).
- 50-60% of attendees in the three hubs agree strongly that activities improve their health and well-being, make them feel more motivated and increase their friends and social life, with high levels in Churchill, Queens Park & Harrow Road in particular.
- There are a very broad range of activities provided in all of the hubs. Activities provided correspond very well with the emerging evidence base of what works to improve health and reduce social isolation among older people (e.g. walking groups, Tai Chi, dance, chair exercise, as well as a range of activities encouraging social interaction).

4.4 With a view to maximising the impact of the Hubs, the review has identified a number of gaps:

- Men are under-represented (hubs say older men in particular). Men account for a quarter of attendees but should account for nearly half, if representative of the older population
- There are challenges reaching the housebound, but phone activities are provided in some cases. Other ways of reaching this group could be explored further
- Hubs have said they raise awareness of their activities with GPs, but more could be done to improve awareness
- There may need to be more clarity around the policy for out of borough attendance: people want to attend activities with friends who live out of borough and may not attend if their friends are not allowed

- Some people attend with mental health issues and some have learning disabilities (although numbers are currently not being routinely monitored). Appropriateness of reaching this group could be explored further
- Hubs suggested they may be missing some frail younger people. These people often have multiple health conditions

4.5 To improve access to preventative services, the project is exploring:

- Opportunities to learn from the Whole Systems project initiated by Central London CCG which will trial an enhanced offering in three of the CCG Villages: South Westminster Village (covering Pimlico Health @ The Marven and Millbank Health Centres); Regent's Canal Village (Paddington Green, Lisson Grove, Little Venice and Crompton Medical Centres) and Marylebone Village (Marylebone, Cavendish and Crawford Street);
- Opportunities to reduce duplication and develop an enhanced preventative offer through an integrated offer with housing services; and
- Opportunities to identify more accessible and better equipped premises for the provision of day services for older people in South Westminster.

4.6 A steering group, chaired by the Cabinet Member for Adults and Public Health, has been established to oversee these works streams. An options appraisal for taking forward these two pieces of work, which is being jointly prepared by officers at Central London CCG and the local authority, will be considered by the group at its next meeting and a further update will be provided to the Health & Wellbeing Board at its next meeting.

5. **Newman Street pilot**

5.1. One of four general needs Temporary Accommodation facilities for single adults located within the borough, Newman Street has some of the most disadvantaged and complex residents. It is a mixed-sex facility comprising of 77 self-contained studio flats. The majority of Newman Street residents are vulnerable adults with complex multiple needs, which include substance and alcohol addiction, significant mental and physical health issues and history of crime and/or anti-social behaviour.

5.2. We have jointly developed with our providers, CLCCG and the Great Chapel Street Primary Care Centre, a model to improve how we target existing services at people with multiple complex needs through addressing their multiple needs in parallel and proactively taking services to them so we can improve their life chances.

5.3. This model is now being implemented and delivery is being monitored against key indicators. An interim evaluation is expected to be completed by Spring and these findings will be brought to the Health and Wellbeing Board.

6. Legal Implications

6.1. None at this time.

7. Financial Implications

7.1. None at this time.

**If you have any queries about this Report or wish to inspect any of the
Background Papers please contact:**

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