



Warwickshire
Health and
Wellbeing
Board

Improving Health and Wellbeing in
Warwickshire - Case Studies 2017/18



Health and Wellbeing Progress 2017-18

Making Prevention Everyone's Business

What we delivered - Coventry and Warwickshire Health and Wellbeing Boards

2017 - 18 saw increasing joint work between Warwickshire and Coventry with a clear commitment to prevention. The joint Coventry and Warwickshire Place Forum was established between both Health and Wellbeing Boards, and the Proactive & Preventative programme was set up, led by Coventry and Warwickshire. The programme includes a pilot on Upscaling Prevention supported by the Local Government Association (LGA), and a Year of Wellbeing to be a catalyst for change and galvanise effort and celebrate existing strengths.

What difference did we make - Coventry and Warwickshire Health and Wellbeing Boards

- System-wide commitment to prevention
- Step change in approach and commitment

What comes next - Coventry and Warwickshire Health and Wellbeing Boards

Year of Wellbeing - 2018 planning alignment for launch 2019.

What we have delivered - Warwickshire Heart Shield

Warwickshire Heart Shield is a jointly funded project by Public Health and Fire and Rescue in Warwickshire delivering training to secondary school pupils in emergency life support skills including Cardiopulmonary Resuscitation (CPR), how to use a Public Access Defibrillator (PAD/AED), and heart health messages. The training aims to increase quality of life and reduce mortality from cardiovascular disease and is delivered by firefighters and volunteers from Jaguar Landrover. To date Heart Shield has delivered training to over 3700 children in 15 of the 36 secondary schools in Warwickshire, with 17 more schools scheduled before August 2018. In January 2018 Heart Shield also demonstrated CPR to 100 attendees at #onething Gurkha event in Nuneaton.

Feedback on Heart Shield sessions

- "That was a superb session this morning and the students loved it. The guys delivering the training were superb. Your team was great at engaging our students."
- "I have learned enough things to help the person until the emergency people come."
- "They were really good because it felt like we were doing real CPR!"

What comes next - Warwickshire Heart Shield

As well as targeting further schools in 2018/19 the project is seeking support from potential sponsors to support delivery, and possible joint working with West Midlands Fire Service and regional Public Health with representatives to enable future roll out of Heart Shield across the West Midlands. It also hopes to deliver additional sessions to adult community groups moving forward.

Rugby Borough Council (RBC)

RBC introduced the combined Children & Adults Safeguarding policy. It up-skilled managers and staff on safeguarding vulnerable adults; completed 10 Adult Safeguarding sessions for 80 managers, who in turn cascade trained around 200 employees; introduced Safeguarding Awareness Induction Sessions in respect of both adults and children; ran 2 sessions on Prevent training, attended by 13 people.

Stratford District Council (SDC)

SDC joined the Home Environment Assessment and Response Team (HEART) initiative in 2017 with the aim of speeding up the processing of Disabled Facilities Grants and hospital discharge grants. Additional resources have been made available from central government to increase the number of individuals SDC can assist. SDC also runs a range of initiatives to encourage physical activity including the Hi-5 scheme and the Active Aging Programme. In 2017-18 there were over 1 million visits to our leisure centres. These initiatives are helping improve the health and wellbeing of our communities.

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Warwick District Council (WDC)

WDC staff have received Make Every Contact Count training, and established a Health and Wellbeing Officers' Group. It has also embedded HWB as part of the WDC Strategic Plan 'Fit for the Future'. WDC is working in partnership with the Fire & Rescue Service to invest in fire safety improvements on WDC high rise housing stock. It has also developed and delivered social prescribing in priority areas, and continued to support food banks and a range of activity groups aimed at preventing isolation and loneliness among older people. It also supports the Armed Forces Covenant supporting those who have served and their families.

South Warwickshire Foundation Trust (SWFT)

In 2017 exciting projects were launched to give proactive care to patients. In Warwick a joint venture with local charities to support GPs and Advance Nurse Practitioners (ANP) was launched to provide enhanced medical care to patients living at Park View Care home and housebound patients in Warwick. Charities supporting the project include: Warwick Relief in Need charity, Warwick United Charities, Warwick Provident Dispensary Charity, King Henry VIII Endowed Trust and the Charity of Thomas Oken and Nicholas Eyffler. Patients were offered care from a small team of GPs from Priory Medical Centre and the New Dispensary, and from dedicated Advance Nurse Practitioners (SWFT). The team visit once a week and offer an initial assessment, clinical and medication review, discuss advanced care planning at the end of life and support relatives and care home staff. The team also undertake proactive visits to housebound patients to help prevent unnecessary visits to hospital and support those returning from hospital. The outcomes are very positive with staff reporting a huge difference being made in the proactive care of patients, and **just over 100 unplanned admissions to hospital have been avoided in six months.**

The pilot was also started at Queensway Court in Leamington to enhance care for patients, by SWFT, GP practices, WCC and Queensway Court staff and residents. Two nurses were recruited to help improve quality of life for residents with complex needs and minimise the risk of unplanned hospital visits. Early reports show that they are making a huge difference to the care of housebound patients, helping them remain supported at home and reducing the amount of ambulance transfers to hospital.

Public Health (WCC)

WCC is leading a programme on reducing the risk of dementia. There is strong evidence that the risk of developing dementia can be reduced by adopting the same healthy lifestyle behaviours as those which reduce the risk of cardiovascular disease, diabetes and some cancers. We have been working with partner organisations and front line practitioners to raise awareness of the healthy lifestyle factors that can help to reduce the risk. A public awareness campaign was delivered during World Alzheimer's Month 2017 and Dementia Action Week 2018. This includes a quiz available through Warwickshire's Living Well with Dementia website, (reducing risk section) www.warwickshire.gov.uk/dementia

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Dementia Friends

What we delivered

The Dementia Friends initiative aims to change the way people think, act and speak about dementia. By the end of 2017-18 there were over 18,000 Dementia Friends in Warwickshire, double the number of people estimated to be living with dementia (around 7,500 people).

What difference did we make

The 18,000 Dementia Friends in Warwickshire have a greater understanding of dementia and have all pledged an action to contribute to a more dementia friendly Warwickshire. Many organisations across the county have also become involved (including libraries, leisure centres, pharmacies, general practices, opticians and council staff), all helping to create a more Dementia Friendly Warwickshire.

Dementia Friends in Warwickshire commented that they found Dementia Friends Information Sessions 'really interesting' and 'thought provoking', and that they have 'learnt a lot'. In a national survey by the Alzheimer's Society, over 70% of people agreed with the statement 'As a carer, I feel that Dementia Friends is inspiring communities to make a positive difference to people with dementia'.

What comes next

WCC and partners will continue to encourage other organisations and individuals to sign up as Dementia Friends, with a target of 30,000 in 2018-19, and half the WCC workforce signed up.

Mental health, wellbeing and dementia services and support

What we delivered

A range of mental health and emotional wellbeing programmes have been established across Warwickshire to provide the right support, at the right time, for people experiencing mental health problems, including dementia. Support includes face to face support, an online community support network, self-help books and audio CDs and telephone support.

Details of all of these services are available in one place:

For Mental health and wellbeing: www.warwickshire.gov.uk/mentalhealth

For Dementia: www.warwickshire.gov.uk/dementia

What difference did we make

The range of mental health and wellbeing support enables people to choose their preferred type of support and also enables people to access services at a range of times (some of which are available 24/7).

Having information on services easily accessible on one website has proven to be very helpful for frontline practitioners across Warwickshire, supporting 'Making Every Contact Count', signposting patients, customers or clients to services, and the websites can also be used by Warwickshire residents on an ongoing basis.

What comes next

We will continue to develop and commission a range of services to enhance mental health and wellbeing and support people to live well with dementia. We will also enhance efforts and interventions to reduce the rates of deaths by suicide in the County.

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Improving Housing and Wellbeing

What we delivered - Housing Partnership Board

The Housing Partnership Board under the remit of the Better Together Programme has made good progress against the 11 areas of focus in year one of its two year plan.

It has raised awareness and understanding between housing and social care managers, building stronger relations across teams and organisations. This has led to clearer escalation routes to resolve complex queries and issues more quickly and reviewing the use of local authority housing stock for older people to support gaps in social care provision. The importance of housing to the health and care system is more widely understood, for example the countywide Delayed Transfer of Care (DTCo) project has incorporated capturing housing delays into its weekly dashboard and action planning. Implementing the countywide Financial Assistance Policy, which includes no means testing, has also help support quicker hospital discharges.

What difference did we make

By working together, areas for enhancing the service offer have been identified such as information and advise on downsizing and potential duplication regarding handyperson services identified to enable more efficient working. A number of adaptations were provided by the Home Environment Assessment Response Team (HEART) in 2017/18, funded by the Disabled Facilities Grant via the Better Care Fund.

What comes next

Increasing awareness and knowledge across frontline health, social care and housing staff to speed up referrals, improve signposting and support proactive preventative activity e.g. Mental Health First Aid training, signposting to Preventing Homelessness Improving Lives (PHIL) trailblazer pilot and developing an information factsheet. Improving housing links with the various social prescribing models across the county by working with GPs to support health and wellbeing. Increasing awareness of the HEART service through communication and marketing activity to help people take responsibility and preventative actions, before reaching crisis point.

Public Health commissioned Mental Health First Aid Training for District and borough Housing teams. A contact and information sheet was created for HEART Housing/Social Care staff to help prompt escalation of issues for quicker resolution.

Rugby Borough Council (RBC)

RBC is working with landlords to increase the supply of temporary accommodation to reduce the use of Bed and Breakfast. It is acquiring new council homes for rent, including 34 new homes at Cawston to be delivered by /summer 2019. The Council continues to make ongoing improvements to council housing stock, for example external wall insulation to 39 homes in Long Lawford. RBC is merging the house Options and Benefits Teams into a new team delivering advice and support to residents regarding Housing and Benefits advice. The Council is also leading the county-wide Preventing Homelessness and Improving Lives (PHIL) team to provide early access to information and support whilst avoiding duplication.

Stratford District Council (SDC)

SDC implemented a range of initiatives with the view of reducing the amount of rough sleepers and homelessness. It also received funding through the national trailblazer initiatives, to work with a wider group of at risk people and help families and individuals before they reach crisis point, including new resident advice services and outreach work with landlords and private sector tenants.

Warwick District Council (WDC)

In 2017-18 WDC carried out regular visits to housing tenants, Financial Inclusion Officers supported the most vulnerable tenants and medical assessments of housing impacts on health were also carried out. WDC undertook an extensive programme of home safety fire checks in WDC high rise housing stock with the Fire & Rescue Service. The WDC Control centre operates a Life Line service 24/7 365 days a year providing an emergency alarm service to residents. Fuel Poverty drop-in sessions were provided at community hubs. WDC continued to support the provision of affordable homes, made improvements in standards of private rent accommodation, secured grant support to partner organisations providing services to the homeless and vulnerable in Warwick District, supported the delivery of Reach Out and Help Service in priority areas and delivered a programme of adaptation to homes. It also now includes an Armed forces question in the application process for WDC housing.

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Early Help for Vulnerable Children

What we delivered - Warwickshire County Council Children and Families

An Early Help Action Group was established to enhance partnership working and develop a common and consistent early help offer in Warwick.

A review of Children Centres was carried out which will lead to an enhanced offer over a broader age range in a more targeted way. The current 39 Centre model will be replaced by 14 Children and Family Centres that (through partnership) will offer 0-19/25 services to children, young people and families.

Family Information Service (FIS)

FIS provides a helpline giving information, advice and guidance to families on a wide-range of issues affecting every day life. It also provides a 'brokerage' service for families experiencing difficulties in finding childcare or accessing other support services. In 2017/18 FIS 'brokerage' opened 298 cases and closed 211 (71%). The main areas of support were around finance, benefits and housing. The brokerage team now sits within the Early Help pod in the Multi Agency Safeguarding Hub (MASH) 3 mornings each week, which has improved the pathway of enquiries to the FIS helpline.

The complexity of referrals and helpline enquiries is increasing; the team are taking a proactive approach by contacting families ahead of visits to provide advice and information and help prevent further escalation of need.

Priority Families Programme

By March 2018, 2,586 families were attached to Phase 2 of the Warwickshire's Priority Families Programme, achieving over 90% of the programme's target of 2,790 families by March 2020. The Priority Families Team has submitted over 400 Payment by Results (PBR) claims within the last year, where they have provided evidence for those families that were supported by services to achieve significant and sustained progress against their issues. This has resulted in a cumulative total of more than 954 claims since Phase 2 of the programme started.

What difference did we make?

The Early Help Service supported 864 families in 2017-18 (1649 children or young people) with a new Early Help Single Assessment. This has increased to 1109 by February 2018. It has achieved positive results, with 70% assessments rated as positive by Early Help Officers and preventing 65 referrals from going to Child and Adolescent Mental Health Services (CAMHS), 17 evictions, 144 family breakdowns, 98 families needing social care intervention and truancy (school attendance improved in 142 families).

FIS has received positive feedback with increased attendances at school, reports of more settled home life and improved behaviour and wellbeing. "Everybody coming together and supporting our family".

The Priority Families programme has generated over £763,200 of funding to support Priority Families through the PBR process since the start of Phase 2.

What comes next

FIS aims to reach families as early as possible and is working with professionals via schools, nurseries, pre-schools, children centres and job centres to advise on the service and encourage referrals before a family's need reaches crisis.

The **Early Help** group aims to ensure that partners fully understand the service and can work together to direct Early Help; that processes are simple and designed for universal practitioners; to align with the proposed Children and Family Centres so that by Sept 2019 there is a smooth transition; and ensure practice is as effective as possible and that we are focused on outcomes. It has a target of 1000 assessments in 2018-2019.

The Priority Families Programme focus is now on aligning the programme with the transformation of Warwickshire's Children and Family services, to ensure sustainability beyond the programme's end in 2020. This will include the embedding of Priority Families priorities across services, such as ensuring all children are able

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to access their educational entitlement and to make work ambition for all supported families where out of work benefits are claimed.

Rugby Borough Council (RBC)

Officers are now more confident in making safeguarding referrals, which have helped to identify early help needs for children. All staff and councillors have been given safeguarding training and E learning courses have been undertaken.

Stratford District Council (SDC)

The Council has provided safeguarding training in the last year to all front facing staff and has appointed a Member and Officer Safeguarding Champions. In addition the Council continues to support County initiatives such as "Making Every Contact Count".

Warwick District Council (WDC)

WDC has provided support to the District Poverty Forum - a network of agencies supporting vulnerable families and also the Priority Families programme. It provides grant support to develop/sustain a range of mother and toddler groups and aspires to attain the Unicef Baby Friendly Award accreditation. It works in partnership with Act on Energy to enable access to the various grants available; provides discretionary grants to be replace boilers and install heating systems and arranges for boilers to be serviced and minor repairs undertaken; and provides help with budgeting, debt counselling and improved life skills by Financial Inclusion Officers and Housing Support Officers. It also supports the development of City Save Credit Union (affordable credit).

Public Health

Public Health implemented health needs assessments for home schooled children and health assessments for young carers. It shared public health data with other commissioned services to support identification of areas of additional need. It continued delivery of the Family Nurse Partnership and Baby Steps programmes for vulnerable families.

Public Health (continued)

In 2017 funding was identified for an emotional health role to support the School Health & Wellbeing Service and the new CAMHS/RISE emotional and mental health contract. A Parent-Infant Mental Health steering group was launched and action plan developed to support families with parent-infant mental health difficulties. 95% of service users felt their thoughts, feelings and concerns were listened to. Quotes from services users: "The nurse was very friendly and explained everything really well. She made me feel really good about myself".

Public Health is working towards transformation of the Health Visiting Service. It is also developing asset based skills within commissioned services. It is working towards aligning services with the development of the children and family centres and the development of infrastructure to support early years settings in supporting the health and wellbeing of children.

South Warwickshire NHS Foundation Trust (SWFT)

SWFT are members of the Children's Transformation Partnership Board. The overarching aim of the board is to join together to improve public services across Warwickshire and make a real difference to children, young people and families by ensuring that the principles of corporate parenting and safeguarding are embedded within the fabric of statutory and non-statutory agencies delivering services to Warwickshire communities and all partners are working to align services, avoid duplication and reduce bureaucracy.

The board is also responsible for ensuring that all children and families have access to good quality early help services as soon as they need them and that the early help strategy is fully understood and that all partners understand their role in it.

In 2017 an Early Help Peer Review noted that partners are engaged and demonstrate a high level of commitment to enhancing Early Help for children and families. It also noted a good range of evidenced based interventions are available. An action plan and Early Help Strategy will now be developed and SWFT will be a key member in developing and driving forward the strategy.

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Integration and Co-location of Services

What we delivered

The following services are now working in partnership with the hosts to enhance their local service offer:

- Family Information Service - providing information and advice to families with children under the age of 20 and providing a brokerage service for families who need extra help.
- Alzheimer's Society - raising awareness of information and support including the Dementia Navigator programme.
- Carers Trust - providing information, advice and support to carers.
- Prison Officers Association Learning Service - providing access to an extensive range of e-learning courses
- Orbit Housing - providing support to local residents including access to their targeted programmes.
- Prospects - providing support and information to ensure young people are either in education, training or work.
- Health Watch Warwickshire - engaging with local people about health and social care issues.
- Compass Warwickshire Health & Wellbeing - providing information and advice on their services.
- Multi-Agency Safeguarding Hub (MASH) - raising awareness of safeguarding issues and where to find information and support.
- WCC Disability Services - providing information and advice.
- Independent Living (direct payments) - raising awareness sessions
- Prevention of Homelessness Improving Lives (PHIL) - raising awareness sessions.
- Fire and Rescue Community Support - awareness raising sessions.

'Let's Talk' Hubs are being piloted by WCC aiming to:

- Improve information and advice available at community level.
- Provide access to digital assistance.
- Understand how specialist services could be delivered at a local level.

The hubs are at Alcester (Globe House), Studley Village Hall, Bidford on Avon Community Managed Library, Christ Church in Brownsover, Benn Partnership Centre in Rugby and Atherstone Early Years Centre. Let's Talk is also being introduced in health care locations including Hospital hubs and GP surgeries via the Localities Team in partnership with the Alcester Health and Wellbeing project.

What difference did we make

- Set significant programmes of work in motion.
- Improved collective view of activity - Mapping of transformation activity across services carried out.

Public Health - What we delivered

A multiagency Smart Start Strategy was produced and Smart Start Foundation Research carried out, demonstrating parent/carer/professional support for integrated services. There is greater integration of health and wellbeing as part of the Sustainable Transformation Partnership's Maternity and Paediatric work stream. A parent/carer/professional engagement programme was set up to help design the new Health Visiting Service and two workshops held to support health and wellbeing elements of the Local Maternity System Board's Action Plan involving Midwifery, health visiting and commissioners across Warwickshire and Coventry. Children centres are being redesigned with integration and co-location as a key principle and a work shop was held with providers to look at outcomes for the new service. Children and Family centres will offer a local focus with outreach sites, helping coordinate and support access to services.

In 2017-18 a community hub model for health and wellbeing was piloted in North Warwickshire in a joint project through the North Warwickshire Community Partnership. The programme co-ordinates a health and wellbeing offer based on the needs of the population and builds capacity to ensure hubs are sustainable in the long term. Happy Healthy and Involved in Whitestone have also adopted hub models focusing on health and wellbeing to identify needs in terms of reducing loneliness and isolation and creating better health and wellbeing.

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What difference did we make

Smart Start foundation research and engagement helped shape understanding about early years need and how best to build resilience in families and children. The Community Hub model is helping meet local needs.

What comes next

Support the transition of the current 39 Children Centres to 14 Children and Families Centres incorporating early years, family support, health visiting and community midwifery hubs between 2018-2020.

- Re-commissioning Health Visiting service.
- Redesign of 0-5 years children services.
- Establish the Coventry and Warwickshire Parent and Infant Mental Health and Wellbeing Steering Group to take forward priorities identified by the Smart Start foundation research and parent/professional engagement and contribute to the priority for maternal perinatal mental health.
- Establish the Maternal Health and Wellbeing work stream for the Local Maternity System Board - as part of the Sustainable Transformation Partnership priority of Maternity and Acute Paediatric Services. This includes delivering national policies for Better Births and Safer Births including Community based Midwifery Hubs to be co-located with proposed Family Centres across Warwickshire and Coventry.
- Updated Maternity Needs Assessment for Coventry and Warwickshire
- Provider to work in partnership with key early years services to identify children and families at risk or poor outcomes and assess the most appropriate response through regular family matters meetings.
- Providers are aware of community led provisions and offer guidance and support to these groups to support positive outcomes for children and families where needed.

Warwick District Council (WDC)

WDC has commissioned contracts with Voluntary and Community Sector to deliver preventative work with communities. In priority areas it has introduced the Walking for Health Programme and delivered Energy Advice drop-in sessions. It has developed a leaflet to promote activities for older people in Warwick; delivered a

social prescribing project in partnership with a number of health centres; delivered a Community Development Service in partnership with Community Hubs' and worked in partnership with Friends of Groups to make the District 'Cleaner and Greener'.

Key deliverables from 2017-2018 that support the priority areas Rugby Borough Council (RBC)

RBC delivers services such as Concessionary Travel on behalf of WCC so that customers can access this service in Rugby which is closer to home. It also aims to ensure that customers who have multiple enquiries are dealt with in one visit or one telephone call (Every Contact Counts)

Stratford District Council (SDC)

SDC has worked with partners across South Warwickshire to establish a South Warwickshire Health and Wellbeing Partnership. The purpose of the Group is to advance the health and wellbeing of local people and encourage people and organisations who arrange for the provision of health and or social care services in the area to work a) in an integrated manner and b) closely with people and organisations who arrange for the provision of any health related services.

South Warwickshire Foundation Trust (SWFT)

SWFT continues to progress joint working with WCC to integrate Reablement and Intermediate Care services to provide a new county wide service - HomeFirst. HomeFirst provides short term services to people of they have experienced an unexpected child crisis or a change in their health which has affected their abilities to do daily living tasks. The service understands the importance of being able to live safely at home.

The current phase of the HomeFirst journey has taken its lead from Warwickshire Care Delayed Transfers of Care Programme. A strategy is being developed to build on the co-location and the HomeFirst model, which supports the delivery of the Out of Hospital model. To support this integrated working the development of a Section 75 will be considered at an appropriate time.

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Adding Value to Acute Service Redesign

What we delivered - the Better Health, Better Care, Better Value programme

The Out of Hospital programme has started across Coventry and Warwickshire, covering a range of services including occupational therapy, community emergency response teams, dietetics specialist palliative care community nursing, physiotherapy and podiatry. The aim is to provide services in the right place at the right time, as close to home as possible, to reduce pressure on A&E.

The Local Maternity System plan was completed and has been approved by NHS England. Work has started on scoping family hubs within Coventry and Warwickshire for community midwifery services. The 'Saving Babies' Lives' care initiative has started at all three maternity units. Five Mental Health and Emotional Wellbeing workstreams have been set up. Pre-engagement sessions are taking place with patient and carer groups to talk about their experience of current services and what they think should be improved. Workshops are being organised for GPs to discuss medically unexplained symptoms and how these may relate to mental health issues.

What difference did we make

The Out of Hospital programme will ensure that people across Coventry and Warwickshire experience the right care and support, from a wide range of providers, in the right place and at the right time and as close to their homes as it can be provided. The NHS Diabetes Prevention Programme, aligned to Upscaling Prevention, is also being rolled out across Coventry and Warwickshire from April 2018. This will provide targeted support for those identified as at high risk of developing Type 2 diabetes, including education on healthy lifestyles, help to lose weight and physical exercise programmes. Partners worked on joint campaign to help alleviate winter pressures and raise awareness of choosing the right health service, increase the take-up of flu vaccinations and advise people on how to stay well during the winter.

What comes next

The contract for Out of Hospital services was awarded to SWFT and went live on 1st April 2018. It includes 6 workstreams; performance, musculoskeletal, demand management, pathway re-design, planned care contracts and resource utilisation.

Local clinicians and commissioners have been working on ways to improve stroke services locally. A proposal was shared with the public in June-July 2017 and feedback has been included in the proposals.

The Mental Health programme is aligning with the work of the Urgent and Emergency Care programme on the Arden Mental Health Acute Team (AMHAT) review, with a workshop for stakeholders planned in April 2018. This will focus on the current challenges in the system and help develop the case for change.

The Better Health, Better Case, Better Value (BHBCBV) programme will help deliver the place-based plan for the Health and Wellbeing boards across Coventry and Warwickshire. The Proactive and Preventative work programme is putting prevention and self-help at the heart of all change programmes. The 2019 Year of Wellbeing will be a key focus.

Public Health

Local area needs assessments are being developed to ensure services respond to local need. This is important in developing the Out of Hospital programme to improve the experience of care for patients with complex needs, including those living with frailty. Public Health is supporting improvements to people experiencing a mental health crisis and ways to strengthen recovery approaches with specialist and community settings, using evidence-based approach. It is also supporting the re-design of Stroke Services through the co-integrated Impact Assessment.

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Place Based JSNA

What we delivered

In 2017, the Health & Wellbeing Board approved a new place-based approach to delivering the Joint Strategic Needs Assessment (JSNA). The move to a focus on understanding needs on a locality basis was in line with a range of transformation programmes across all health and wellbeing partners, and a three-phased programme of work was approved.

The first was to agree a consistent set of 'JSNA Geographies' creating 22 areas across the county that would be used to profile needs and design services across the health and wellbeing system. These geographies were agreed at the HWBB in July 2017 and all partners committed to using these areas for strategic planning purpose.

The second phase of work was to produce a JSNA Profiling Tool. This would enable all partners to create statistical profiles for a range of different areas, including the JSNA geographies. For the first time, all partners are able to use a common evidence base to understand the make-up of the geographies they have committed to using. This tool was presented to the HWBB in September 2017. There has been significant positive feedback on the usefulness of this tool.

The third phase of work approved in January 2018, is to deliver a suite of needs assessments across the JSNA Geographies and this will be the focus of attention for 2018 and 2019.

What difference did we make

For the first time, all health and wellbeing partners are able to work from a consistent evidence base at the local level, creating shared understanding of need. The profiling tool has been well utilised and feedback has been positive. The shift in focus for the JSNA has been significant; we have moved from a model where specific theme-based needs assessment were being produced for individual commissioners, with variable impact, to an approach where partnership buy-in is required before analytical resource is committed.

What comes next

The suite of place-based needs assessments will be delivered from 2018-20. The HWBB has committed to a model that ensures local ownership of each needs assessment; this will mean the specific local narrative and evidence will be captured and there will be a stakeholder group in each area committed to utilising the evidence generated.

What we delivered

The Pharmaceutical Needs Assessment (PNA) looks at the pharmaceutical services provided in Warwickshire, including dispensing of prescriptions by community pharmacies, dispensing GPs and other providers, and other services available from community pharmacies. The Health and Social Care Act 2012 transferred responsibility for the development and updating of the PNA from Primary Care Trusts to HWBBs. Each HWBB must publish a statement of its revised assessment within 3 years of its previous one. Therefore, Warwickshire's HWBBs second PNA was published in March 2018.

What difference did we make

The number and distribution of the current pharmaceutical service provision in Warwickshire is deemed as sufficient. However, there are variations in provision and opportunities for further development of the pharmacy service in Warwickshire. There is also the opportunity to improve communications of the offer from pharmacies and to capitalise on the capacity within the range of services offered from community pharmacies and for future service development

What comes next

The recommendation from the PNA will be reviewed and championed and a Pharmacy Steering Group will be set up to report on progress to the Health and Wellbeing Board. A new PNA will be required by March 2021, or sooner if there are any significant changes to pharmacy provision in the next 3 years, such as significant population growth.

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Clinical Commissioning Intentions

What we delivered

The commissioning intentions of Warwickshire's three Clinical Commissioning Groups (CCGs) were endorsed by the Health and Wellbeing Board in September 2017. This year's commissioning intentions reflect year four of the five year Coventry and Warwickshire CCGs's Strategic Plan 2014-19 (Transformational Change: Transforming Lives). The aim is for greater alignment with the Health and Wellbeing Board Strategy and the Joint Strategic Needs Assessment (JSNA).

Warwickshire Cares Better Together Programme

What we delivered

In 2017/18 the Better Together programme agreed a two year improvement and integration plan, outlined in a section 75 agreement between health and social care with a number of projects. Activities have been prioritised to deliver improvements, in particular to reduce delayed transfers of care (DToC). A weekly DToC dashboard has been introduced to provide transparency and visibility across the system for the first time. WCC and the three Clinical Commissioning Groups have agreed to greater financial transparency and visibility of out of hospital service spend, including aligning further budgets to represent the majority spend for all out of hospital services.

What difference did we make

Some improvements include:

Reduce Delayed Transfers of Care - Despite a downward trend in performance from June to October 2017, performance stabilised during the winter pressures. The focus is now on continuing the downward trend across the community as well as acute sites and building in sustainable ways of joint working. The DToC improvement activity has also highlighted the need for stable and sustainable

domiciliary care providers. Through a new approach to domiciliary care, we are working with providers to increase capacity and identify alternative support options in the community. We have also strengthened the brokerage model to include six working days.

Reduce Non Elective Admissions - There is better use of resources and providing seamless services for our customers by jointly commissioning services and sharing information between health and social care partners. For example, Warwickshire's Joint Carer's Strategy and the new Carer's Wellbeing contract went live in June 2017 and supports carers, help reduce carer breakdown and avoid crisis situations which often result in admissions to hospital. A schedule 11 detailing on-going contract management and quality assurance arrangements of care homes between WCC and CCG's has been agreed (a variation to the existing section 75 agreement).

Reduce long term admissions to residential and nursing care - Both the countywide Integrated Community Equipment (ICE) and Home Environment Assessment and Response Team (HEART) have gone from strength to strength over the last 12 months. ICE now delivers a robust 7 day/same day service and has seen significant growth in the number of requests from the Acute sector supporting people to be discharged earlier and/or avoiding admissions to residential care.

Improve the effectiveness of reablement services - WCC and South Warwickshire Foundation Trust (SWFT) are looking at ways to optimise capacity across reablement, Community Emergency Response Team (CERT) and ICT services and to maximise the benefits of reablement to people receiving it. This includes exploring new ways of working such as domiciliary care providers delivering low level interventions and the first of a series of pilots using leading-edge Assistive Technology products and systems to optimise hydration and medication management to reduce falls, including in care homes.

Health and Wellbeing Progress 2017-18

What comes next

During 2018/19 the Better Together programme will:

- Put in place plans to bring together WCC's and SWFT's out of hospital services (preventative, social care and NHS non-acute) into one governance framework. This will begin by agreeing ways of working via a Memorandum of Understanding. There will be a 2 year period of transitional activity to implement the new Out of Hospital service model.
- Implement the second phase of the two year plan. This includes continuing our work around reducing delayed transfers of care; expanding the centralised brokerage model; more Assistive Technology pilots including: supporting people with dementia and their carers in the community, epilepsy management/monitoring and establishing a Learning and Development Service for Residential/Nursing Home providers to ensure their workforce is equipped with the skill, knowledge and competence it needs to deliver for the Transformation Programme.

