Title: Prevention Approach Update

Report of the Cabinet Member for Adult Social Care and Health

Open Report For Decision

Wards Affected: All wards Key Decision: No

Report Author: Lewis Sheldrake, Prevention Manager, Integration and Commissioning

Contact Details:
Tel: 0208 724 8109
Email: lewis.sheldrake@lbbd.gov.uk

Sponsors:
Cllr M Worby, Cabinet Member for Adult Social Care and Health, London Borough of Barking and Dagenham

Glynis Rogers, Lead Divisional Director, Adult and Community Services, London Borough of Barking and Dagenham

Summary:
The paper titled “Prevention: A Local Framework for Preventing, Reducing and Delaying Care and Support Needs In Adults” reported to the Health and Wellbeing Board on 12 May 2015. This report introduced the local Prevention Approach with an accompanying Prevention Framework which proposed a way in which the Council and its partners should respond to the statutory obligation laid out in the Care Act 2014.

This report is to update the Board on the progress of embedding the Prevention Approach locally. This includes:

- the formation of a Prevention Steering Group, with a range of partners, which works to influence and harness existing local prevention activities which prevent, reduce or delay the development of needs for social care and support.
- The alignment of policy approaches through the NHS Five Year Forward View and the Barking and Dagenham Joint Health and Wellbeing Strategy.
- A number of engagement activities have taken place across the Borough to support embedding the principle of adopting a holistic approach to wellbeing and understanding how needs may be prevented, reduced or delayed by others within the community, rather than by public sector services.

The report also recommends the following next steps:

- Develop a Prevention and Information and Advice Workshop for front line professionals across Barking and Dagenham.
- Review the Prevention Scheme within the Better Care Fund for 2016/17 to align future work to identified programme outcomes.
- Enhance understanding and support for the approach within the voluntary sector.
via further engagement and mapping sessions.  
- Implement the agreed ‘Commissioning for Prevention’ approach into existing and future contracts.
- Continue to develop the Prevention Approach to align with and support Ambition 2020 projects going forward.

Recommendation(s)

The Health and Wellbeing Board is recommended to note the content of this report and agree the proposed next steps

Reason(s)

The Prevention Approach supports the Borough’s overall vision of One borough; One community; London’s growth opportunity, and provides a practical framework to realise key elements of the underpinning priorities. The application of the approach makes real the priority of Enabling Social Responsibility by supporting residents to take responsibility for themselves, their homes and their community. This also contributes to ensuring there are support mechanisms to enable our residents to live more independently, whilst still offering a safety net of support for our most vulnerable.

Section 2 of the Care Act 2014 requires that a local authority must provide or arrange for services, facilities or resources which would prevent, reduce or delay individuals’ needs for care and support, or the needs for support to carers. Local authorities should develop a clear, local approach to prevention which sets out how they plan to fulfil this responsibility, taking into account the different types and focus of preventative support.

1. Introduction and Background

1.1 The local Prevention Framework adopted in May 2015 has three guiding principles.

1.2 Prevention is only effective when individuals (Me), communities (Us) and public services (You) work together. This promotes the strengths-based approach to assessing needs and supporting people.

1.3 The diagram below illustrates the approach.

![Diagram illustrating the prevention approach]

- What can public services offer?
- What can we best do together?
- What can I bring?
1.4 **Principle 1:** Prevention starts with every individual (Me). The approach starts with the individual – the person who may have needs. This may include the contribution of friends and relatives who are providing care for someone with needs. The starting point is considering what the individual can do for themselves and already has to help meet their needs, and what is potentially available.

1.5 **Principle 2:** Prevention is a job for the community (Us). The next step is for the individual to consider what the wider community might be able to offer. Putting Me and Us together helps to create a community that underpins effective social responsibility. By bringing together civic pride, individual responsibility and local growth, neighbourhoods across the borough can recreate a sense of community wellbeing.

1.6 **Principle 3:** Prevention and the role of statutory agencies (You). The statutory agencies, for example, the NHS, Council, police, employment agencies, colleges and schools continue to have duties of care. However, their role may be focused on specific population groups, or on people with high levels of need. Nonetheless, the principle of prevention that can delay or reduce the impact of needs must be ever-present.

1.7 This approach is informed by and seeks to develop the Council’s priority of Enabling Social Responsibility. This means that individuals, with support where necessary from communities and local networks, will be primarily responsible for making their own decisions about their own life choices and for seeking the advice and information they need to achieve the outcomes they desire.

1.8 The local Prevention Approach is aligned and contributory to outcomes and targets of the Better Care Fund as well as themes and priorities within the Joint Health and Wellbeing Strategy which was agreed by the Health and Wellbeing Board on 7 July 2015. This was reemphasised in the key recommendations of the Joint Strategic Needs Assessment 2015 which reported to the Health and Wellbeing Board on 8 September 2015.

1.9 These shared outcomes support the objective of ensuring that individuals with the highest levels of need will continue to receive support from statutory agencies such as the NHS and, for those who meet the national eligibility criteria, from the local authority, whilst seeking to prevent the need for such interventions wherever possible.

2. **Embedding the approach**

2.1 A number of initiatives have taken place across a range of partners to seek to embed the Prevention Approach within the broader context of the Council’s priority of Enabling Social Responsibility.

2.2 A key first step was the widening of the existing BCF prevention group to encompass a wider range of partners and embed the Prevention Approach locally. The group is currently focused on services for adults and therefore the current membership of the Prevention Steering Group includes:

- Adult Social Care
- Clinical Commissioning Group
2.3 The diversity of partners and services represented at the Prevention Steering Group highlights the breadth and significance of the prevention agenda locally. The remit of the Group is to harness existing local prevention activities across the borough, and ensure that consistent working practices are employed, which complement those of other services. This works to encourage a seamless pathway that helps to prevent, reduce or delay the development of needs for social care and support.

2.4 The role of prevention across the partners has been recognised and is increasingly referenced or driven through both policy direction and practical approaches.

2.5 The prevention approach was a significant plank in the refreshed Health and Wellbeing Strategy which was agreed by the Health and Wellbeing Board on 7 July 2015. The strategy sets out the four key themes for public health, health and social care in Barking and Dagenham. These are:

- Prevention
- Protection and safeguarding
- Improvement and integration of services
- Care and support

2.6 The Prevention theme is defined in the Barking and Dagenham Joint Health and Wellbeing Strategy 2015-2018 as “Supporting local people to make lifestyle choices at an individual level which will positively improve the quality and length of their life and overall increase the health of the population.”

2.7 The local prevention agenda is aligned with a number of national guidelines across the health and social care economy. For example, the NHS Five Year Forward View acknowledges that the future sustainability of the NHS hinges on a radical upgrade in prevention. It acknowledges that the health service can't do everything that’s needed by itself, but affirms that the health service needs to be a more activist agent of health-related social change, leading where possible, or advocating when appropriate, a range of new approaches to improving health and wellbeing.

2.8 The NHS Five Year Forward View also shares the seven priorities from Public Health England’s five year plan From Evidence Into Action: obesity; smoking, harmful drinking and alcohol-related hospital admissions; ensuring every child has
the best start in life; dementia; antimicrobial resistance; and tuberculosis. It specifically calls on the NHS to offer more proactive prevention activities through primary care. A first step will be a new national diabetes prevention programme establishing a model of care that can be expanded to other conditions and linked with the NHS Health Check.

2.9 Following the publication of NHS planning guidance in December 2015 health commissioners are required to produce a five year Sustainability and Transformation Plan (STP) to drive forward the Five Year Forward View. The planning and commissioning process will be place-based, rather than organisation based. It must also cover all areas of CCG and NHS England commissioned activity including specialised services and primary medical care. The STP must also cover integration with local authority services including prevention, reflecting local health and wellbeing strategies.

2.10 An example of a service aligned with the prevention approach is the Improving Access to Psychological Therapies (IAPT) programme which supports people suffering from mild to moderate depression and anxiety disorders. The programme offers patients a realistic and routine first-line treatment, combined where appropriate with medication which traditionally had been the only treatment available. By targeting those people within primary care, it reduces the need for dependence upon medication alone. IAPT further promotes independence by giving consideration and weighting to support people in job retention for those in work and struggling with a mental health condition, and for those seeking work with such a condition.

2.11 One of Barking and Dagenham CCG's initiatives that embeds a prevention approach is “Everyone Counts” which designs and delivers schemes of care directed at residents over the age of 75. The cohort has also been extended to also include residents over the age of 65 who have two or more long term conditions. A comprehensive assessment framework has been developed to screen a number of areas including the risk of falls. These assessments allow clinicians to discuss conditions with patients and deepen their understanding of how they can better self manage their conditions.

3. **Engagement**

3.1 A number of engagement activities have taken place across the Borough to highlight the role that various services can play in engaging with and supporting individuals and communities to take a more preventative/enabling approach. This has supported embedding the principle of adopting a holistic approach to wellbeing and understanding how needs may be prevented, reduced or delayed by others within the community, rather than by public sector services.

3.2 This principle reinforced that there is no single organisation or sector that can take sole responsibility for achieving the intended outcomes of the Prevention Approach. Rather this is a golden thread that needs a joined up response at local, regional and national levels across health, care, public health, wider local government, the community and voluntary sector, education, skills and employment support, as well as other areas.

3.3 Consistent themes and culture / process shifts which have emerged through the engagement process are as follows:
• A focus on capitalising on individuals’ resources and strengths rather than needs and deficiencies

• Identifying ways of promoting independence rather than reinforcing dependence

• Enabling people to do things for themselves rather than always deferring to public sector services

• The importance for effective and appropriate signposting to other services – see Section 4 below.

3.4 The Integration and Commissioning Team supported two workshops for individuals with Learning Disabilities who had recently been impacted by a change in their circumstances due to eligibility thresholds. The Prevention Approach was used to help the individuals to consider their own strengths and resources and promote independence. The workshop simply used a weekly diary and facilitated/supported conversations between individuals and community based providers about the activities they would like to do. This workshop helped a number of individuals and their carers to look at the opportunities that were available in changing circumstances and make informed decisions about the next steps.

3.5 Engaging with social workers and other key professionals has helped to ensure that prevention is applied from the first point of contact with an individual or carer to promote strengths-based Care and Support planning. The workforce development and training programme was supplemented by giving staff ‘Quickcards’ to reinforce learning and prompt them on key points of policy and procedure. The Prevention Quickcard is attached at Appendix B.

3.6 The Voluntary and Community Sector are integral to the adoption of the Prevention Approach and officers have met with a number of key local providers to explore synergies between services and to identify how the approach impacts on service delivery locally.

3.7 Part of this engagement included an informal review of existing working practices in order to identify how these align with the principles of the Prevention Approach. This was generally conducted using case study examples relevant to the provider. A number of the themes highlighted at 3.3 were reflected in the work of the organisations that were engaged with. This has led to better joining up of provision and support for residents with regard to wellbeing.

4. The role of Information and Advice

4.1 A consistently emerging theme throughout the adoption of the Prevention Approach has been the importance of providing high quality, impartial information and advice to residents about local preventative services, resources or facilities.

4.2 From April 2015 the Care Act placed a statutory duty on councils to provide information and advice to the whole population that is both accessible and relevant. Specifically, the Care Act 2014 highlights that providing accurate and timely information and advice is ‘… vital in preventing or delaying people’s need for care and support.’
Barking and Dagenham have developed the Information and Advice Plan 2015-2018 in line with the Care Act 2014. This strategy is aligned to the Community Network Strategy which builds on the ‘digital by design’ approach providing local access points where it is intended that residents can find a wide range of information.

Key to the provision of information and advice are the digital platforms that provide the information. There has been continued development of the Care and Support Hub as the borough’s local online directory for adult social care services and wider information. In addition the development of BanD Together Routemaster provides residents and practitioners with tools that take account of multiple or complex needs and delivers relevant and accurate signposting to appropriate services including benefits, local agencies and other support organisations.

The provision of high quality reliable information and advice to residents is integral to the promotion of wellbeing, and is fundamental to enabling people and families to make well-informed choices about their own wellbeing. Building a stronger, more resilient and engaged community should also help reduce demand on Council services in the longer term enabling us to continue to support the most vulnerable.

Development of ‘Commissioning for Prevention’

The local Prevention Approach is shaping the local strategy on a number of commissioning issues, including information and advice provision; carers support services, supported living, learning disability day services and an imminent review of extra care housing. The formalisation and embedding of these steps into an agreed approach is an on-going piece of work that is being shaped by the practical experience of implementing the prevention approach.

The Integration and Commissioning team has been part of the working group, reviewing a number of Public Health funded Health and Activity based projects which aim to prevent, reduce or delay health and social care needs from developing. The purpose of this piece of work is to achieve efficiencies and bring future commissioning for 2016/17 in line with local strategic objectives. The prevention approach has informed this process and promotes joint-working.

The Prevention Approach is already reflected in the Market Position statement which aims to develop a market that offers a choice of affordable, locally available responsive services that people want. The vision of the Market Position Statement is for ‘people to be active citizens; able to live a meaningful life and make positive contributions to the community they are part of, whilst not losing sight of the relationships and interests that are important to them.’

A Commissioning for Prevention learning event is being delivered on 11 January 2016 by the London Health and Care Integration Collaborative (LHCIC) and the Healthy London Partnership Prevention Programme (HLP), working closely with Public Health England. This event will support the identification of local commissioning priorities and areas for high return on investment and will be attended by the Integration and Commissioning team.

A Commissioning for Prevention Workshop is planned to take place in February 2016 within Integration and Commissioning and Public Health. The objective of the
workshop is to establish a “commissioning for prevention” methodology along with a simple process for partners to use to apply to commissioning and contracting. This will also support the revision of current contracts to emphasise the preventative approach throughout the care or service pathway. A second workshop for other services and partners will take place in March 2016.

6. **Better Care Fund**

6.1 Prevention, combined with other schemes within the Better Care Fund contributes towards helping local people to stay healthy and well for as long as possible and reducing avoidable demand for services across health and social care.

6.2 The key focus for the Prevention scheme is on falls reduction/prevention, in order to address the associated significant number of admissions to acute care, loss of independence and negative impact on long term health and disability. The Prevention Scheme has commissioned two pilot projects which seek to prevent, reduce or delay occurrences of falls:

- Barking and Dagenham Handyperson Scheme provides practical support into individuals own homes to reduce environmental hazards that may contribute to falls or ill health.

- Whole Body Therapy delivered a 12 week community based progressive evidence based falls management exercise programme. Including targeted, personalised and progressive strength and balance exercise sessions.

6.3 An evaluation of the Whole Body Therapy programme has evidenced an improvement in participants’ mobility and functional strength. Participants also said that the course had a positive impact on their confidence and wellbeing. These outcomes will help to reduce or delay health and social care needs from developing further by supporting participants to live more fulfilled and independent lives, with an improvement in performing daily living activities. A paper on this project will report to the Better Care Fund Delivery Group in February 2016 to inform future commissioning decisions.

7. **Care City Test Bed Application**

7.1 The Integration and Commissioning Team have established close links with Care City given a number of complementary work streams, including prevention. The Integration and Commissioning Team supported Care City in their bid to become a ‘test bed’ site by supporting the short listing process to identify innovators offering new concepts in health and social care. A number of these outcomes can be achieved through innovations which prevent, reduce and delay health and social care needs from developing.

7.2 NHS England has defined one of the priorities of the programme to be achieving the prevention of illness and improvement of health and wellbeing through innovations which support behaviour change as well as approaches to whole population health management. The meeting of this priority was supported by the embedding of the local Prevention Approach to ensure alignment with other local initiatives and priorities.
8. Visbuzz

8.1 Barking and Dagenham has recently been successful in applying to become a London Ventures Visbuzz pilot borough funded by the Capital Ambition Board of London Councils. The Borough has been awarded £41,000 for the pilot.

Visbuzz is an extremely simple way for people who do not use computers to make and receive video calls. This project is aligned with the local Prevention Approach and works to overcome the barriers which exacerbate social isolation such as family and friends not living within a manageable distance to meet in person. This project helps to empower our most vulnerable residents to maintain or re-establish their individual support networks, thus reducing demand on public services.

8.2 The Borough has 100 units for this project, which will be implemented across a number of cohorts including:

- Socially isolated older people (via Cluster Teams)
- Carers
- Long term needs – Asian Communities
- Voluntary Sector cohorts via DABD
- Sensory Impairment

9. Ambition 2020 and The Growth Commission

9.1 The Council and its partners face significant challenges in the next few years with the continued reduction in local government funding. This is being addressed locally through the Growth Commission and Ambition 2020.

9.2 The prevention approach is becoming a golden thread that expresses, in its widest sense, some of the future direction of travel in working with residents and partners in the borough. The adoption and implementation of the approach will present practical challenges but many of these are reflected by both the initial headlines of both the Growth Commission and Ambition 2020.

10. Next Steps

10.1 The proposed next steps to further embed the local Prevention Approach are as follows:

- Develop a Prevention and Information and Advice Workshop for front line professionals across Barking and Dagenham.
- Review the Prevention Scheme within the Better Care Fund for 2016/17 to align future work to identified programme outcomes
- Enhance understanding and support for the approach within the voluntary sector via further engagement and mapping sessions
- Implement the agreed ‘Commissioning for Prevention’ approach into existing and future contracts
• Continue to develop the Prevention Approach to align with and support Ambition 2020 projects going forward.

11. Mandatory Implications

11.1 Joint Strategic Needs Assessment

The implementation of the Prevention Approach will further support the priorities identified in the JSNA for our residents’ health and social care.

11.2 Health and Wellbeing Strategy

This programme will further and support the following priorities in the Joint H&WB Strategy:

• Increase the life expectancy of people living in Barking and Dagenham
• Close the gap between the life expectancy in Barking and Dagenham with the London average.
• Improve health and social care outcomes through integrated services.


11.3 Integration

The Care Act is very specific that the responsibility for prevention is shared between stakeholders. The Care and Support Statutory Guidance states that ‘Local authorities must ensure the integration of care and support provision, including prevention with health and health-related services, which include housing. This responsibility includes in particular a focus on integrating with partners to prevent, reduce or delay needs for care and support.’ (Para 2.34)

11.4 Financial Implications - completed by Carl Tomlinson, Group Finance Manager

Activities undertaken in delivering the prevention approach are been managed within existing resources held in the Better Care fund (BCF). The allocation set aside in 2015-16 is circa £1.6m mainly funded from the Public Health grant, the Adult Social Care capital grant and the Adult Social care new burdens grant. The Council was successful in bidding to be a London Ventures Visbuzz pilot borough and has been awarded £41,000 which is also aiding the delivery of the prevention approach.

Going forward, the BCF funding arrangements would need to be reviewed and agreed for 2016-17 and any other requirements arising in future years would need to be incorporated into the Ambition 2020 agenda.

11.5 Legal Implications – completed by Dawn Pelle, Adult Care Lawyer

There are no legal implications for the following reasons:
The prevention strategy is being developed with the Care Act 2014 in mind;
- Note has been taken of 2.34 of the statutory guidance;
- It notes the important of integration between statutory services, i.e. housing and health who are deemed partners;
- Recognition that the process is a holistic one and that the service user can access assistance from their network as well as statutory services.

The report goes further and sets goals specific to LBBD and what needs improving for example, the life expectancy of its residents.

12. Non-mandatory Implications

12.1 Safeguarding

Protection from abuse and neglect is one of the nine domains of wellbeing as defined by the Care Act 2014. All initiatives under the umbrella of the Prevention Framework must have regard for safeguarding vulnerable adults in line with local safeguarding policies and procedures.

12.2 Contractual Issues

Commissioners will need to ensure that existing providers are aware of the need to comply with the Prevention Framework which may require further engagement and development.

Where appropriate, when re-tendering or commissioning new services, it is essential that specifications for services have regard to the Framework, ensuring that it provides the guiding principles and foundation of key actions and activities in commissioning and service development. All such arrangements should incorporate ‘commissioning for prevention’.

12.3 Procurement Implications – completed by Adebimpe Winjobi, Category Manager

The Care Act 2014 requires that local authorities must provide or arrange for services, facilities or resources which would prevent, reduce or delay individuals’ needs for care and support, or the needs for support to carers.

This paper sets out how the local Prevention Approach is shaping the local strategy on a number of commissioning issues, including information and advice provision; carers support services, supported living, learning disability day services and an imminent review of extra care housing.

The formalisation and embedding of these steps into an agreed approach is an ongoing piece of work that is being shaped by the practical experience of implementing the prevention approach to achieve efficiencies and bring future commissioning for 2016/17 in line with local strategic objectives.

Once the commissioning plans for these services are finalised, the procurement team would support commissioners throughout the process to ensure service models are aligned to strategic aims; services are procured in full compliance with
the Council’s Contract Rules and Public Contracts Regulations 2015 depending on the contract values.

Individual tenders will be designed to ensure that contracts are awarded to the bidder or bidders submitting the most economically advantageous tender(s), taking account of economy, efficiency and effectiveness.

List of Appendices:

Appendix A – Prevention Quickcard