



Committee and Date

Council

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REPORT OF THE PORTFOLIO HOLDER FOR ADULT SOCIAL CARE/HOUSING AND PUBLIC HEALTH

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ADULT SOCIAL CARE

1.0 Introduction

- 1.2 Adult Social Care ("ASC") has had another challenging year. In January 2017 the leadership structure was reviewed and significant changes were made. In June we welcomed a sector led improvement peer challenge. The Peer Review team were complimentary about the work of ASC and noted the enthusiasm of the ASC workforce and all stakeholders they engaged with. The Peer Review saw a clear commitment to making a positive difference to the lives of Shropshire residents and achievement was recognised in the Council's approach to partnership and engagement.
- 1.3 As portfolio holder I continue to be impressed with the progressive culture in Adult Social Care that constantly reviews our approach and is always looking for improvement and innovation. My portfolio report provides cabinet with an overview of the significant developments and achievements that have been delivered in 2017.
- 1.4 Adult Services net budget has increased by £5.8m from 2016/17 to 2017/18, due to the combination of a growing and ageing population, increasingly complex care needs, and increases in care costs. It is well evidenced that the demographic pressures on adult social care will increase further in the longer-term. Shropshire Council's expenditure on adult social care is forecast to increase by £7m next year, and by an average of £8.3m per year over the next 5 years.
- 1.4.1 Continued cost pressures being faced by care providers, particularly as a result of the National Living Wage, energy price increases and price inflation, have resulted in the Council being exposed to significantly increased market prices.
- 1.4.2 In the last Parliament, a series of short-term funding measures for adult social care were announced by the Government, namely the Social Care Precept, improved Better Care Fund (iBCF) and Adult Social Care Support Grant, in order to try to address pressures on adult social care. These additional funding measures are one-off and time-limited, and therefore do not change Shropshire Council's underlying funding gap.
- 1.4.3 In March 2017, Shropshire Council was awarded additional iBCF funding for 2017/18. This funding is explicitly focused on reducing pressures on the NHS, particularly delayed hospital discharges.

2.0 Mental Health

2.1 The Countywide Mental Health Social Work Team consolidated and developed its new model of delivery; with an identity distinct from our health colleagues but working very closely in partnership with them. A move to a central location has helped the team to be firmly linked to the community, enabling it to deliver the more preventative elements of work.

3.0 The Emergency Duty Team (EDT)

3.1 EDT's mission statement is to safeguard the people of Shropshire by providing urgent Social Work Services outside of normal working hours. It has been busy year for EDT which has changed its operating model and rotas to enable more time for practitioners to deliver emergency social work interventions out of hours, including all bank holidays and weekends (The council is legally obliged to have an AMHP available for MHAs 365 days a year, a duty that EDT provides).

4.0 Integrated Community Services (ICS)

4.1 The team continues to work hard to ensure that people are discharged from hospital in as timely a manner as possible thereby preventing any delayed transfers of care (DTC). Covering all Shropshire hospitals, as well as any out of county hospitals with Shropshire patients, **the team was tasked with improving the DTC rate by 60% between April and September. ICS has played a large part in not only achieving the target, but exceeding it and improving the DTC rate by 75%.**

5.0 Improved Better Care Fund (IBCF)

5.1 Following the government announcement of the additional monies provided to LA's 'The Improved Better Care Fund' has enabled a series of new initiatives as part of our ongoing work to ensure those in need of support are able to remain at home rather than going to hospital unnecessarily or having to live in a nursing or care home.

5.2 The Improved Better Care Fund (iBCF) monies have provided additional staffing resources to our hospital social work team, with which **a new target was set to increase discharges from the acute hospitals; from a baseline**

5.3 The team has also worked very closely with colleagues from the Redwoods psychiatric unit to reduce the number of avoidable admissions. This has been very successful, and; for a 10 month period from late 2016 there were no new admissions to the Redwoods from care homes.

6.0 Continuing Health Care (CHC)

6.1 In 2017, Adult Social Care made a commitment to recruit 3 dedicated Qualified Social Work staff to specifically focus on joint assessment responsibilities with Shropshire CCG.

6.2 Adult Social Care have supported the joint reassessments of existing individuals who are jointly funded between the CCG and Adult Social Care and have provided Social Care Practitioner staff to ensure that assessments are jointly completed and compliant with best practice guidance.

7.0 Let's Talk Local (LTL)

7.1 This year we have continued to consolidate and develop the Let's talk Local Hubs. **Adult Social Care now operate 20 Let's Talk Local sessions throughout Shropshire**; some sessions are drop in and others are with appointments. The key development this year has been starting some drop in sessions in two of the local community hospitals. We now aim to also provide this service on the Royal Shrewsbury Hospital site once we can identify some space.

8.0 Transition from Children's Services

8.1 In 2017 **Adult social care have welcomed our new senior transition lead, who has been working to improve the transition process in ASC**, which we had recognised required improvement.

8.2 Our aim is to improve the communication, information and advice for young people at an early age so they can develop their own aspirations for their future.

8.3 In October 2017 we were fortunate to win a grant to enable us to deliver the Named Social Worker Pilot. The pilot is exploring 'Good Social Work' with people with learning disabilities working in partnership with Severndale Specialist Academy. The intended impact of the pilot is to define how we deliver excellent person-centred support for individuals with learning disabilities their parent/carers and to explore how we improve our social worker practice to deliver high quality, responsive, person-centred and asset based care and support.

9.0 Deprivation of Liberty Safeguards

9.1 The joint action (with three other local authorities) taken last year against the Government for inadequately funding DoLS was not successful. We agreed additional investment in this area in order to fulfil our statutory duties have plans in place to increase this resource further. While this area remains a risk the progress we have made is reducing the reputational risk for the Council and increasing the safeguards for people who lack capacity to consent to the where they receive their care and treatment.

10.0 The Client Property and Appointeeship Team

10.1 This team looks after the financial affairs of people not able to manage themselves with no one else appropriate to do this for them. **They are currently sixty percent self-funding**, as they are able to charge the individual for the services and support they provide. **The team are working on increasing this percentage over the next couple of years in order to reduce the contribution currently received from the Council.**

11.0 The Keeping Adults Safe in Shropshire Board

11.1 The Board continues to operate effectively having a strategic oversight over the arrangements to safeguard adults with care and support needs from abuse. **We have a new joint board manager for Shropshire adults and children safeguarding boards.** The Annual Report that explains their activity for 2016/17 has now been published.

12.0 The Adult Safeguarding Team

- 12.1 This team continues to make decisions on a daily basis about whether contacts made to the Council about safeguarding should result in an enquiry being undertaken with the person effected. In 2016/17, there were over two thousand contacts made to the Council. Over 200 enquiries were undertaken and the majority of people were helped to resolve their problems either on their own or with support from either other agencies or the Council

In house Provider Services

13.0 Day Services

- 13.1 I am pleased to report the **successful transfer of the Meres day service in Ellesmere to Bethphage in July 2017** and became 'Our Space: Ellesmere Community Centre and Library.
- 13.2 With regards to our other in house day care provision **Maesbury Metals and Cornerpatch day services are currently transferring to Livability**, a national charity which will support the continuation and growth of these two services as well as delivering a saving over 5 years to Shropshire Council. The remaining in house services will now be developed with the people who use services and their carers and staff teams to ensure that all services are innovative, creative, meaningful and purposeful for all those that attend and outcome focussed.

14.0 Enable - Supporting people with disabilities into paid employment

- 14.1 **Enable has provided employment support across Shropshire, Telford, Wolverhampton, Staffordshire and Birmingham this year and has successfully supported (to date) almost 300 people into paid employment. This includes people with learning disabilities, mental health issues, autism and armed forces veterans.**
- 14.2 **Travel Training Celebration:** this was held by Shropshire Council's Travel Unit at Shrewsbury Football Club ground in June 2017 to celebrate the success of Enable providing travel training for young people in Shropshire to get to school or college as an alternative to using a taxi or similar transport.
- 14.3 **Mental Health and Employment Event for Employers:** This was held in October 2017 and was chaired by myself. Employers from across Shropshire were invited to hear the business benefits and successes of employing people with mental health issues.

15.0 START

- 15.1 The START service is our in house rehabilitation team who continue to offer a very valued service, evidenced by the number of compliments received from service users and highlighted in 'compliment of the day' and were part of the wider group involved in supporting the decrease in DTOC.

16.0 Four Rivers

16.1 Four Rivers is our 40-bed nursing home in Ludlow. The home provides high quality nursing support which appears highly valued as the home has had no complaints this year which perhaps illustrates the regard the home is held in. The home has had a bed occupancy of 98% this year, which is positive.

17.0 Joint Training

17.1 A busy year as always for our training colleagues who have been delivering high quality training across the social care sector. The team have been delivering training across the county in subjects such as Shropshire Leaders and Managers, Advocacy Certificate, End of Life care, Substance Misuse, Maastricht Interview and Autism Training to name a few.

18.0 Commissioning and Governance

18.1 Over the past 12 month there have been a number of areas for development within adult social care commissioned services.

19.0 Community Living Transfer March 2017

19.1 We saw the successful transfer of our community living services to a new supported living provider, Perthyn. As a part of their person centred approach, Perthyn supports individuals in maximising the opportunities to access activities and local amenities whilst supporting them to present a positive image of themselves in their local community.

20.0 Fee uplift Negotiations and confirmation April 2017

20.1 Following negotiations with Shropshire Partners In care (SPIC) Shropshire Council has committed to offer providers an inflationary uplift for the next 3 years, which helps, manages costs to the council but gives business security to the providers. The uplifts were confirmed as follows:

20.2 Residential and Nursing (including block contracts)

- 2017/18: 2% effective Monday 3rd April 2017
- 2018/19: 2.5% effective Monday 2nd April 2018
- 2019/20: 3% effective Monday 1st April 2019

20.3 **Domiciliary providers were given an uplift of 3% per year over the 3 years**, this increase allows for the additional costs incurred by the rurality of our county and the financial impact that this has on providers when delivering domiciliary care.

21.0 Provider engagement event June 2017

21.1 We held to hold a provider engagement event with domiciliary care and residential and nursing care providers. We used this time to review our draft market position statement and review our current demand for services and how we can meet the needs of individuals in a more creative and cost effective way. Following on from this event we had further meetings with providers regarding our current contracts and this led to a new tender for reablement support being commissioned. We plan to book events for 2018 to continue to engage with the provider market around future commissioning opportunities

22.0 Retender of reablement service to preferred provider model October 2017

22.1 Since November 2015 the Council has had block contracts for reablement work in place with a number of providers around the county; however to ensure a flexible and responsive service the decision was taken to move to a preferred provider model.

22.2 Working to reable individuals means that there will be an expectation that providers will reduce, where safe and in accordance with the initial support plan, the input of care hours during the maximum of a 6 week period of service and ensure wherever possible that agreed outcomes and goals are achieved.

23.0 Closure of Doddington Lodge Residential care Home October 2017

23.1 Shropshire Council was extremely disappointed to hear the decision by the owners, to close Doddington Lodge Residential Home in Cleobury Mortimer. At the time ASC were commissioning 18 beds in the home.

23.2 Our social work team, senior managers and commissioners supported the home through the closure process and the social work team have actively worked with residents to make sure residents were safely rehomed in alternative accommodation.

24.0 Prevention Engagement Event November 2017

24.1 Following an **announcement by the Clinical Commissioning Group in September 2017 that they would not be providing further grants to the Voluntary and Community and Social Enterprise (VCSE) sector**, we have been working closely with our colleagues in the VCSE. We recognises the longer-term financial impacts on social care and health budgets if the preventative outcomes currently being delivered by Shropshire's VCSE sector are at risk through funding reductions to the sector

24.2 Shropshire Council Adult Services has commenced work with VCS and local housing providers to review and plan our approach to commissioning preventative services beyond 2018/19. These include many of the Better Care Fund schemes, in particular Social Prescribing. It is hoped that Shropshire CCG will be able to work with the Council on this review.

25.0 Principal Social Worker (PSW) and Professional Development Unit (PDU)

- In response to the Care Act an in-house training programme has been developed for social care practitioners who are not professionally trained. This year the module was accredited by Chester University providing 10 successful candidates with 20 credits at Undergraduate level. There are 12 candidates who have started the module this autumn and the programme will form part of a career progression pathway.

26.0 Making it Real (MiR) and Partnership Boards

26.1 **Early in 2017, Making it Real (MiR) was shortlisted for an MJ Award in 'Excellence in Community Engagement'**. This shortlisting recognised the hard work of experts by experience and Council partners, as well as their commitment to enhance adult services.

26.2 The enthusiasm of the ASC workforce and all stakeholders was then again recognised in the ASC Peer challenge during June 2017. This Peer review saw a clear commitment

to making a positive difference to the lives of Shropshire residents and achievement was recognised in the Council's approach to partnership and engagement.

- 26.3 A new and expanded MiR Board has now been established, having had its first meeting in late October.
- 26.4 MiR has an important role to play in the development of ASC. It is there as an important reminder that social care is about improving real people's lives not just offering a service. Making it Real continues to work to ensure that the voice of lived experience is heard, valued and used to inform developments and practice in Shropshire's Adult Social Care.
- 26.5 The linked 'Plan on a page' sums up what Making it Real is about in Shropshire. [Follow this link to take a look at the plan.](#)

27.0 Conclusion

- 27.1 Adult social care continues to flex and adapt to an ever changing landscape of challenges; more people with more complex needs, care providers struggling to recruit staff in a rural area, and healthcare colleagues working to reorganise hospital based services. There are considerable uncertainties around future funding initiatives from Government in relation to Adult Social Care and the across the wider health & social care economy. But I am confident that our prudent approach to operational spend, continuing focus on managing demand and our drive for continuous innovation and improvement, will help to maintain the delivery of essential services. I am happy to share my view that the tireless dedication of our staff and partner organisations (including the voluntary sector), are delivering improved outcomes in the quality of life for people who need us most in Shropshire.

28.0 Housing

- 28.1 Housing is a group of interrelated services which includes the Housing Options Service, Private Sector Housing Service, Shropshire HomePoint and Housing Support.
- 28.2 It also has governance and monitoring responsibility for Shropshire Towns and Rural Housing, a Arms-Length Management Organisation (ALMO), which manages the Council's housing stock.

29.0 Housing Options & Homelessness Service

- 29.1 There have been 1,010 homelessness presentations in the calendar year to date.
- 29.2 Of the 882 homeless application decisions, 298 (34%) were accepted as statutorily homeless and owed a full housing duty. The team has also received, is helping, or has helped, with over 2,725 advice and prevention enquiries from individuals and families.
- 29.3 A key challenge for the Service will be implementing the new Homelessness Reduction Act 2017. It is widely considered to be the most significant change in homelessness and housing advice legislation in over 40 years, which begins in April 2018.
- 29.4 The Homelessness Strategy and Action Plan is currently under review. There will be a full consultation process in the New Year, including briefings for Cabinet and Members.

30.0 Private Sector Housing

30.1 The service has continued to see significant reports of owner occupied properties which are in serious disrepair and exhibit a high number of Category 1 hazards (Housing Health and Safety Rating System). Hoarding remains a challenge, a major contributor to poor and hazardous home environments. The Service works closely with Regulatory Services, Health, Community Mental Health and Social Care services to address this issue through partnered approaches.

31.0 Disabled Adaptations

31.1 In the financial year 2016/17, there were 364 Occupational Therapy Service referrals, the majority of which were completed. In this financial year, 203 referrals have been received already.

31.2 The Service continues to work closely with the Occupational Therapy Service, Adult Social Care and Children's Services.

32.0 Shropshire HomePoint

32.1 Shropshire HomePoint, the county's choice-based lettings scheme provides a one-stop customer focused solution to meet the increasing needs and aspirations of the people of Shropshire.

32.2 The current number of applications on the Housing Register is 5,167. In 2016/17 1,575 applicants and their families were rehoused through Shropshire HomePoint and many more were helped to find alternative housing solutions.

32.3 The team on average manages everyday 250 telephone calls, as many emails and receives over 1,250 unique visitors to its website.

33.0 Housing Support & Contracts

33.1 To support its work, 'Housing' commissions, monitors and reviews a number of contracts with external organisations. Broadly they can be divided into accommodation-based support and floating support.

33.2 'Housing' continues to work closely with other Service Areas, such as Adult Social Care, Children's Services and Public Health. As an example, it is working with Children's Services to redesign accommodation for young people in the county.

33.3 **The New Century Court Project in Oswestry**, in conjunction with STaR Housing will provide **12 bed spaces for clients aged between 16 to 35, including a training flat and crash pad**. It is expected to open in April 2018.

33.4 **Working with Adult Social Care, new projects include Step-Down Beds to reduce Delayed Transfer of Care from hospital and Step-Up Beds using Extra Care bed spaces rather than hospital beds.**

34.0 Telecare Hospital Discharge Pilot

34.1 Working with telecare service provider Well-being, Housing and Adult Social Care has recently begun a pilot project exploring the benefits to be had from the provision of telecare at point of discharge from hospital.

34.2 The benefits of this model include; a reduction in delayed hospital discharge, reduction in hospital re-admissions, avoidance or delay of more intrusive forms of care and the introduction of telecare to people who may not of considered it previously.

35.0 Home Ownership for People with Long-Term Disabilities (HOLD) Project

35.1 The HOLD Project, supports clients to purchase a home on a shared ownership (part rent / part buy) basis.

35.2 **Following the successful bid for £2.4 million grant funding**, the Project has recently seen the successful completion of 3 property purchases with many more in the pipeline currently being processed.

35.3 The project aims through owning a home, to promote long-term stability; improve wellbeing; provide reassurance; independence; reduce the need for residential care and hospital admissions; and promote community sustainability.

36.0 Syrian Refugee Assistance

36.1 The civil war in Syria began in 2011, with over half the Syrian population leaving their homes to escape the conflict. In January 2014, the UK government established the Syrian Vulnerable Persons Resettlement programme in response to the Syrian refugee crisis.

36.2 Over 100 local authorities volunteered to resettle refugees. **Shropshire is proud to have been able to help and has successfully rehoused families and unaccompanied young children, totalling 59 individuals.**

37.0 Council Housing Stock

37.1 The Council Housing Stock Options Review of the remaining 4,100 properties (in predominantly the Bridgnorth and Oswestry areas) is currently underway. Property Specialists Savills are assisting. Any resulting recommendations will be considered by Cabinet and Full Council.

37.2 Members will continue to be kept fully updated, including a Members Briefing Event to be held in February 2018.

38.0 Technology-Based Projects

38.1 The Service, working with ICT Colleagues, has begun a number of innovative projects to maximise the benefits from advances in technology, to encourage the development of smart homes, and where possible utilise mainstream consumer technology.

38.2 **'Housing' also recently held a successful Assistive Technology Event called Severn Tech Seed, to promote technology. This is being expanded next year, with**

a major event planned for the 17th and 18th July 2018 called 'Tech Severn 2018' to promote Four Centres of Excellence in, Assistive Technology, Digi-Health Technology, Eco-Technology, and Modern Methods of Construction (MMC).

PUBLIC HEALTH

40.0 Children and Young People Team Commissioned Services: Health Visiting and School Nursing

40.1 Local Authorities are responsible for commissioning Public Health Nursing Services for 0-19 year olds and up to 25 where additional needs are identified. A new 0-25 Public Health Nursing Service contract was developed and put out to tender. Shropshire Community Health Trust were awarded the contract that commenced on 1st October 2017. The service specification was developed to enable the opportunity to provide a coherent, effective, flexible approach that uses a greater skill mix of staff delivering services in homes, community settings, schools and FE colleges to meet the needs of the children and young people of Shropshire. The 0-25 Public Health Nursing Service has amalgamated the services provided by health visiting, Family Nurse Partnership and school nursing.

40.2 The core public health offer for all children includes:

- Child health surveillance (including infant physical examination) and development review.
- Child health protection, immunisation and screening
- Information, advice and targeted support for families with additional needs
- Health promotion and prevention by the multidisciplinary team
- Defined support in the early years and education settings for children with additional and complex health needs
- Additional or targeted public health nursing support as identified in the JSNA, e.g. support for looked after children, young carers or children of military families.

40.3 Health, wellbeing and resilience are essential to the development of all our children now and for their future. Evidence through the national Healthy Child Programme shows that we can achieve this approach through a strong children and young people's Public Health service.

The specification for this contract will:

- provide an opportunity to tailor services to what is needed within localities and communities across the county;
- focus on improving accessibility of services,
- enable continuity through transition points for children and young people,
- deliver improved child health outcomes in Shropshire.

Co-ordination and Delivery of health promotion in schools.

40.4 **TaMHS (targeted mental health support)** encompasses training programmes, support and co-ordination of activity across a wide range of agencies, including schools, colleges, social work etc. to develop expertise of frontline staff in identifying and working with children and young people who experience lower levels of mental health issues.

- 40.5 **PSHE, RSE and working with schools.** The programme works with schools and the school community such as parents to deliver evidence based, young people informed curriculum and whole school approaches which address and contribute to council strategic priorities e.g. safeguarding, safer communities and equalities. Children Services Ofsted report 2017-highlighted “comprehensive and well-developed work” “extensive work “undertaken to measure impact. The programme works with key partners in Health, Education, Police and voluntary sector. Reach: over 87% of all Shropshire primary schools, all secondary schools including Catholic consortium and independent sector are signed up to work with the co-ordinator.
- 40.6 **PSHE and RSE work plans include:**
- Focus on raising curriculum standards via the PSHE young Inspectors scheme; work with vulnerable young people. Issues such as CSE, grooming and online safety, emotional and mental health
 - Policy and guidance for schools on Transgender, Drug and Alcohol, bullying, sexting and peer to peer abuse
 - Raise status and profile of PSHE, helping school prepare for statutory status, supporting school leadership and governors
 - Support and contribute to regional and national developments via W.M. Public Health England, Sex Education Forum advisory group and PSHE Association expert group
- 40.7 **Nationally recognised:**
- 2017 Winner of the Children and Young People Award PSHE category
 - 2015 finalist Pamela Sheridan Sexual Health award for innovation for the RSE primary
 - 2012 Winner as above for the secondary RSE programme
 - PSHE Association accredited quality assurance for the RSE work
 - Shropshire’s work features in a number of national publications and conferences as a good practice case study, most recently 2017 LGA conference.
- 40.8 **Partnership Working:**
The children and young people staff are involved in a variety of work streams, including:
- The reshaping of maternity services (subset of the Local STP arrangements)
 - Developing best practice for schools etc. in relation to Ofsted requirements
 - Leading professional development training and good practice in relation to mental health and wellbeing for C&YP
 - Developing innovative approaches to emerging issues (eg LGBTQ, substance misuse)
 - Leading elements of developmental work to support the implementation of the new 0-25 Emotional Health & Wellbeing Service
- 40.9 **Future plans:**
- Greater integration, alignment and data sharing with Children’s Services, e.g. Adverse Childhood Experiences (ACEs), school readiness and LAC information, with a focus on outcomes
 - Accident prevention and hospital admissions (under 5’s)
 - Tracking the impact of targeted interventions, e.g. Fit Families, Breastfeeding
 - Development of Teen Health initiatives plus TaMHS training modules to encompass further education settings

- Development of PSHE support to cover early years' settings as part of the 0-25yrs approach.

41.0 Substance Misuse

Willowdene Women's Recovery Centre

- 41.1 'Willowdene's mission statement is "to stimulate, encourage and promote a purposeful offending and substance free lifestyle in a working society" that creates the system of recovery that engages service users in treatment through to successful programme completion and ultimately overcoming dependence for good.
- 41.2 In March 2017, Willowdene Farm was awarded a three-year contract, directly from the Ministry of Justice, with match funding from the West Mercia Office of the Police and Crime Commissioner, to provide the Women's LINC (Local Initiatives Nurturing Change) Project - a whole systems approach for females in, at risk of entering, or leaving the Criminal Justice System across West Mercia. The primary aim of the Women's Recovery Centre (WRC) is to provide recovery day services and residential programmes enabling women initially across Warwickshire and West Mercia (Shropshire, Telford & Wrekin, Herefordshire and Worcestershire) and then promoted nationally to overcome alcohol and/or substance misuse dependence and achieve sustainable recovery. The WRC project will offer an extension of services currently offered by Willowdene on a new women only site, separate from the main centre.
- 41.3 The WRC will offer the opportunity to deliver treatment specific to the needs of women with dependency issues in a dedicated environment. The programme will consist of recovery-orientated treatment that helps women overcome their dependency issues and in turn reduces the harm that addiction causes to our communities. The programmes are designed with the individual and their families at the heart of their recovery plan, enabling them to take greater responsibility for rebuilding their lives and shaping their future'
- ##### **41.4 The UK Recovery Walk 2018: Shrewsbury**
- 41.5 The UK Recovery Walk celebrates the achievements of people in recovery from drug and alcohol dependency, alongside promoting the work of treatment services. The walk also gives the opportunity to demonstrate that recovery is possible and challenges the stigma often associated with drug and alcohol dependency. Each year around 5000 people travel from across the country to participate in the event, this year the walk was held in Blackpool
- 41.6 Following a very successful campaign, Shrewsbury won a national public vote to host the UK Recovery Walk in 2018, the 10th anniversary of the walk. The walk will take place on Saturday 8th September 2018. The 1.5-mile circular route will start and end in the Quarry Park, and will take in many of the key landmarks of Shrewsbury including Quantum Leap, Shrewsbury Castle and the Town Square. The walk will conclude with a family friendly celebration event in the Quarry.
- 41.7 The planning for the walk has already begun. Coordinated by the Shropshire Drug & Alcohol Action Team, the Shrewsbury Recovery Walk Steering Group, made up of a range of partners and stakeholders including Shrewsbury Town Council, The Shropshire.
- 41.8 Recovery Partnership, University Centre Shrewsbury, FAVOR UK; the national charity

who oversee the walk and a range of Shropshire Council departments and services will be meeting on a monthly basis. Service users and members of the recovery community will also be fully involved in the every aspect of the planning process.

- 41.9 In addition to celebrating recovery, the recovery walk will give an opportunity to raise awareness of drug and alcohol dependency and challenge the stigma linked with substance misuse. The opportunity of hosting the walk will also create a lasting legacy for recovery in Shropshire, bringing together disparate recovery communities across the county, which can be isolated due to the rurality of the county.

42.0 Sexual Health

- 42.1 In April 2016, following a formal procurement process, Shropshire's contract for Integrated Sexual Health Services was awarded to South Staffordshire and Shropshire NHS Foundation Trust, for a period of 3 years, with an option to extend for a further 2 years. The contract provides the mandated sexual health services of comprehensive, open-access, contraception and sexually transmitted infections (STIs) testing and treatment services. Shropshire Council's Public Health Team completed a comprehensive needs assessment of sexual health in 2015 in order to inform the service specification and baseline activity.

- 42.2 Shropshire continues to have the lowest diagnosis rates for all new sexually transmitted infections in the West Midlands. Teenage pregnancy rates also continue to remain lower than national and regional rates, and again is the lowest in the West Midlands region.

- 42.3 HIV diagnosis in Shropshire remains low in comparison to both the West Midlands region and rest of England, however, the late diagnosis rate is higher than both the West Midlands and England rate. PH continues to work with the provider, PHE and NHSE, to develop unique and sensitive approaches to HIV prevention services, to encourage those at risk to access HIV testing who are reluctant to access main stream services. PH commissions a free and confidential HIV home sampling service for those at higher risk and has developed with Health Protection England, County wide prevention campaign material, widely advertising access to the online HIV home sampling service which is integral to the National HIV testing campaign.

43.0 Help2Change

- 43.1 As more people live longer, there is an urgent imperative to keep people well and reduce the demand on health and care services.

- 43.2 Help2Change is focused on tackling the major risk factors for disability, including smoking, poor diet, physical inactivity, obesity and cardiovascular risk factors (high blood pressure, high cholesterol and high blood glucose).

Smoking:

- 43.3 Help2Change delivers the award-winning stop-smoking service Help2Quit to more than 2,500 people each year. Stop smoking services have been identified as one of the most cost effective interventions available to reduce disability (National Institute for Health and Care Excellence). The additional spending on social care for adults aged 50 and over in Shropshire as a result of smoking is estimated to be £8.3 million per year.

Obesity:

43.4 Help2Change supports more than 1,000 obese people each year to lose weight through its Help2Slim service. Being obese increases the risk of diabetes, heart attack, stroke, arthritis, cancer and dementia. This results in severely obese people having a three times greater need for social care compared to people of normal weight.

Cardiovascular risk factors:

43.5 Help2Change carries out over 8,500 NHS Health Checks every year in Shropshire as part of a mandated national programme to identify and manage cardiovascular risk. Heart disease and strokes are a major cause of disability but they can largely be prevented by identifying and managing risk factors such as high blood pressure. Risk of dementia can also be significantly reduced.

43.6 **Wider determinants of health:**

Most frailty in later life is not a normal consequence of ageing but is an acquired risk from a combination of social circumstances and unhealthy behaviours. Shropshire's Healthy Lives programme addresses this in partnership with the NHS and the third sector, building on evidence from successful initiatives elsewhere. Help2Change provides core infrastructure support to the programme, including social prescribing advisor sessions and GP practice support.

43.7 **NHS Health Check:**

Help2Change is on target to meet the Council's statutory responsibility to invite the full 5-year eligible Shropshire population (approximately 100,000 adult residents) to their first NHS Health Check by 2018.

43.8 Collaborative working between general practice and Help2Change has enabled both invites and take-up of the service to rise year-on-year, with over 8500 Patients attending during the past year. The close working between organisations has also enabled essential follow-up interventions to be made available within general practice and community settings, to address risks such as smoking and obesity. Access to the NHS Health Check has been improved through the provision of evening sessions and use of the Help2Change mobile clinic.

43.9 Help2Change has also provided NHS Health Checks to West Midlands Ambulance staff, as part of its commercial workplace offer.

Stop Smoking Services and Tobacco control

43.10 Help2Quit stop smoking clinics are being delivered in 35 general practices, 22 pharmacies and a range of other community venues in Shropshire, offering easy access to one of the most effective interventions for reducing disability and premature death. Help2Quit is an award-winning service, treating more than 2,500 patients each year.

43.11 Approximately 38,000 adults in the county still smoke and smoking remains a leading cause of health inequalities, preventable illness and premature death. A national economic review has indicated that smoking adds £8.3 million per year to the cost of social care in Shropshire for adults aged 50 and over. There is also an additional cost to the NHS in Shropshire of over £10 million per year.

43.12 Help2Change continues to work with the hospitals and mental health trust, in support of smoke-free policies and referral of patients that smoke into Help2Quit. Help2Change is also commissioned by NHS England to provide stop smoking support to HMP Stoke

Heath, and successfully supported the prison in its transition to become completely smoke-free in August 2017.

- 43.13 Electronic cigarette use has increased in recent few years and Help2Change has provided a position statement on e-cigarettes that recommends the use of licensed stop smoking medicines for quitting but which offers behavioural support to those who wish to use unlicensed, self-purchased e-cigarettes as part of their quit attempt.
- 43.14 Shropshire's smoking in pregnancy rates have reduced from 16.4% in 2004/5 to 12.4% in 2016/17. All pregnant smokers in Shropshire are referred by maternity services to the Help2Quit service, and 161 pregnant women received support to quit from a dedicated specialist advisor in 2016/17. The Help2Quit pregnancy service offers a choice of venues including GP practice, pharmacy, community, home visits and telephone support. Help2Change also delivers specialist training on smoking in pregnancy to nurses, health care assistants and pharmacy staff.

Weight management services and obesity prevention

- 43.15 Help2Change provides weight management support to adults through its Help2Slim service in GP Surgeries, pharmacies, community centres and workplaces, treating approximately 1,000 patients per year in Shropshire.
- 43.16 Overweight and obesity is a major cause of chronic illness and disability, especially type 2 diabetes. In Shropshire, there are more than 16,000 adults with diabetes and approximately 31,000 with pre-diabetes. The cost to social care in Shropshire of diabetes and its complications is estimated to be £8m per year, with an additional cost to the NHS of £47m per year.
- 43.17 Public Health is also responsible for delivering the statutory National Child Measurement Programme (NCMP) in Shropshire, which provides annual data on the weight status of every child measured in Reception Year and Year 6 of primary school. 8.3% of 4-5 year olds in Shropshire are very overweight (obese) and this figure rises to 16.7% by age 10-11 years. Help2change chairs a local multi-agency working group which works closely with Shropshire's School Nursing Service to undertake the measurements and provide important follow-on support services to families. This includes proactive follow-up telephone support as well as referral into 'Fit Families' weight management support, a six month programme offering confidential and family-centred support to enable families with very overweight children to achieve and maintain a healthy weight.

Physical activity and prevention of falls

- 43.18 One in two women and a third of all men in England are damaging their health through a lack of physical activity. Tackling physical inactivity is central to ageing well and reducing frailty in later life. A linked priority is the prevention of falls. Currently one third of the population aged over 65 falls at least once a year. It's estimated that around 400 older people fall every week in Shropshire, with 1 in 5 of these falls resulting in significant injury. Injurious falls often lead to a loss of independence and are very costly to health and care services as well as to the individual and their families.
- 43.19 Public Health has funded Outdoor Partnerships to deliver:
- Walking for Health (weekly, volunteer-led walking for those requiring support) which contributes to the prevention or delay of long-term health issues, and supports

people to live independently for longer. In 2016-17 there were

- 56 active groups across Shropshire
 - 338 volunteer walks leaders
 - 1,818 participants
 - 47% of participants with one or more long term condition
 - 86% of participants aged over 55yrs and 20% over 75yrs
 - 710 people walking every week
- Shropshire Wild Teams (conservation volunteers who are users of mental health services). Mental health professionals and supporting agencies report that the Wild Teams are making a significant difference to the health of service users, and helping to reduce costs associated with relapses, hospital admissions, home visits and medication use.

43.20 Public Health is also providing support for falls prevention and has:

- delivered a 'Lets Talks about the F-Word' programme in partnership with Age UK STW to promote a range of national evidence-based resources that enable people to understand their personal falls risk and take action to reduce that risk. These tools are being used in health and adult social care services <http://www.healthyshropshire.co.uk/topics/ageing-well/preventing-falls/>
- commissioned Energize STW (County Sports Partnership) to recruit and train local exercise instructors in delivering a community-based postural stability exercise pilot for reducing risk of falls:
 - 9 independent exercise instructors are training as Level 4 Postural Stability Instructors. An additional 2 University students (USC) are being trained
 - Classes will be established for self-referral and referral from health and care services in community settings in early spring 2018

43.21 Keeping physically active represents a significant challenge for care home residents. Public Health has been working with Shropshire Partners in Care (SPIC) to help care homes to adopt a physical activity-promoting culture. A 'best practice' framework guides care homes in self-assessment of current practice to identify areas for improvement and to implement changes e.g. use of a validated physical function tool in care planning. SPIC will share these exemplar approaches across Shropshire's care home sector.

Healthy Lives programme.

43.22 The provision of clinical care has been shown to have less impact on people's health than their lifestyle behaviours and the conditions in which they live. The Healthy Lives programme has been developed by Shropshire Council in partnership with the NHS and the community, voluntary and social enterprise sector to take a population-based approach to keeping people well in their local communities, building on existing assets. Help2Change provides core infrastructure support to the programme, including the provision of social prescribing sessions and GP practice support.

43.23 Demonstrator sites have been established in three different localities in Shropshire, and a funding bid has been submitted to the Department of Health to enable the programme to be scaled up across the county. An evaluation of the impact of the programme is

being undertaken by Westminster University.

- 43.24 Aligned to the development of Healthy Lives, Help2Change is collaborating with the Shropshire and South Staffordshire Foundation Trust to provide behavioural support for Shropshire residents with enduring mental illness. A one-stop clinic at the Severn Fields surgery in Shrewsbury provides behaviour change support for patients already attending mental health appointments. Support is offered on nutrition, weight management and stopping smoking. Volunteers are now being recruited to deliver additional social prescribing interventions.

Education and training

- 43.25 Help2Change has continued to expand its education and training offer in support of 'Making Every Contact Count' and NHS Health Check, which helps to develop the professional competencies necessary to effectively support people in managing their own health. Training reflects current evidence of best practice and supports nationally recognised core and technical competence standards.
- 43.26 In 2016-17 Help2change commenced work with five GP Practices (Demonstrator Sites) to provide accredited structured education for Shropshire residents living with pre-diabetes. Structured education has been shown to be effective in preventing development of diabetes and its associated complications. The work has led to the implementation of a locally owned and tested pre-diabetes protocol ahead of implementation of the National Diabetes Prevention Programme (NDPP) in April 2018. Help2Change is creating a digital education platform which will greatly increase the reach to Shropshire residents with pre-diabetes, and which will also be developed into a commercial offer outside Shropshire.