

Detailed Progress Update October-December 2017

Healthy Lives

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. 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.

All age Carers Strategy

Agreed strategy in place and linked to Social Prescribing, Safe and Well visits and dementia companions. A number of actions have been achieved in the past six months covering individual carer health, development of new roles to support carers (hospital discharge processes and community based strategy emphasises the importance of working with partners to identify carers and connect carers to the support they need, as well as ensure that services take carers needs into consideration (eg. Hospital discharge processes). A number of key actions have also taken place including:-

- Flu vaccination for carers as part of the Stay Well this Winter campaign
- The employment of two new roles to support carers, with a lead based at the Royal Shrewsbury Hospital to support discharge and a community based role in the Lets Talk Local Team.
- Piloting of a new 6 hour direct carer support offer through the Carers Trust .
- Awareness raising through; distribution of publicity materials and displays in pharmacies, libraries, hospitals, local mental health trust and GP practices to encourage those carers not seeking support to access it; focus on Carers Week and the development of an on-line carer awareness package for council staff linked to the Carers Rights Day 24.11.17
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- Work has continued to ensure the Carers Voice recommendations influence the strategy and for Young Carers, links have been made to the Safe and Well Visits.
- Links have been strengthened with the work on mental health and further work to ensure the profile of carers remains high is planned for 2018.

CVD & Healthy Weight and Diabetes Prevention

- Local work (through Help2Change) has progressed working collaboratively with GP practices to develop a pre-diabetes protocol and the delivery of evidence based Expert Patient sessions that includes structured information sessions offering advice, guidance and information about diabetes to demystify language, answer questions on pre-diabetes and explains the health monitoring processes. Further ongoing community support is also identified. These have been well received by patients and practices.
- At a strategic level, work has progressed with the CCG and NHS England on the National Diabetes Prevention Programme.

COPD/ Respiratory & Safe and Well Safe Visits –

Shropshire Fire and Rescue Service working with the Council are delivering Safe and Well visits across the county. The model expands Fire Service Home Safety Checks and includes the identification of health and wellbeing issues including, home warmth, falls, lifestyle choices (smoking, physical activity), and isolation and loneliness (including a focus on carers). Fire and Rescue Officers are trained to work directly with residents to ask questions appropriately, signpost to other services and make referrals when there is a need for specialist support.

They have been trained using an evidence based model known as Making Every Contact Count (MECC) The programme has referred 104 people to services for additional support, of these 71 were known to Adult Social Care Services. The greatest number of referrals are around falls and social isolation.

Recent press coverage took place to promote the work including staying well this winter. In addition an excellent promotional video showing the impact of the programme has been produced.

<http://shropshire.gov.uk/news/2017/11/new-video-shows-partnerships-local-communities-improving-lives-local-residents/>

Social Prescribing Demonstrator Site

Implementation of social prescribing in the Oswestry and Ellesmere area with referrals from 4 GP practices, Adult Social Care, the VCS, Family Matters, and mental health services. There are approximately 18 providers offering approximately 50 interventions. Westminster University are independently evaluating the impact of the programme. All four practices are participating in this with a focus on cardiovascular risk, loneliness those with lifestyle risk factors, with mental health difficulties and carers.

Referrals are steadily increasing, and issues identified currently are concerns over loneliness, debt and benefits advice, lifestyle issues such as weight and mental health. The programme is attracting interest from other GP practices and is expanding into different areas. These include:-

- Bishops Castle
- Albrighton

- Brown Cleve
- Our Health Partnership a consortium of six practices across the south of the county, and north of the county.
- Shrewsbury practices.

Bishops Castle are now operational and Albrighton practice will host a stakeholder launch event for Social Prescribing on 23/1/2018. Brown Cleve have an action plan in place with a focus on diabetes prevention, loneliness and isolation.

The council chairs the regional steering group and a network event is planned for 1/2/2018. Shropshire Social Prescribing featured on radio Shropshire and were part of the feature on the Midlands Today Sunday Politics Show which also featured clients from the programme participating in the Walking4Health project.

Falls Prevention/Musculoskeletal Health and Physical Activity

Physical activity can be a solution to many health problems but more importantly if worked into daily routines can be a positive way of preventing many conditions from occurring in the first place. If physical activity became the norm amongst the population that would result in better physical and mental health as well as wellbeing.

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.

The Shropshire approach to physical activity has a series of targeted programmes to improve certain health conditions and work with people who are at risk, to reduce falls, improve self management of musculoskeletal conditions, and positively impact on mental health. Alongside this we are also encouraging the whole population to be more active through our Everybody Active Everyday model, our outdoor partnerships active volunteering programmes such as Walking for Health, and Parish Paths Partnerships.

Programmes and Services Include:-

- Community Postural Stability Instruction (exercise for falls prevention) pilot.
- Outdoor Partnerships active volunteering programmes: Walking 4Health, Shropshire Wild Teams, Parish Paths Partnerships, Volunteer Rangers. All of the above contributes to the prevention or delay of long-term health issues, and supports

- people to live independently for longer. In 2016-17 there were
- o 56 active groups across Shropshire
 - o 338 volunteer walks leaders
 - o 1,818 participants
 - o 47% of participants with one or more long term condition
 - o 86% of participants aged over 55yrs and 20% over 75yrs
 - o 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.

- Joint Pain Advisor to support the self management of joint pain (pilot project)
- Delivered a 'Lets Talks about the F-Word' programme in partnership with Age UKSTW 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>
 - Everybody Active Every Day – system wide approach supporting the Public Health England national framework to address physical inactivity.
- Pilot site for the testing of a 'Physical Activity Clinical Advice Pad', supported by Public Health England as part of their Moving Healthcare Professionals Programme. This helps clinicians to promote physical activity as part of routine care in NHS settings. Intended to build on the work of MECC (making every contact count) the advice pad will be used with patients.

Keeping physically active represents a significant challenge for care home residents. Joint work 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.

Future Planning and Housing

Extensive work is taking place within the housing department covering the development of physical assets such as housing, different models to support hospital discharge and the use of telecare. This includes:-

- One Scheme - development of 20 purpose built bungalows which will be high spec, MMC and fully adapted / able to be adapted – state of the art tech installed to reduce reliance on care
- Paul's Moss 'Health Village' - provision of 60/70 Extra Care Housing units working with Wrekin Housing Trust and incorporating a community hub and GP surgery with the aim of a living lab using assistive technology.

- Pilot programmes to develop for new models of Step Down and Step up Beds to support speedier hospital discharges, care packages and alternative ways to reduce the use of community hospital beds.
- Promotion and use of a range of discretionary grants to support vulnerable clients from energy efficiency initiatives to equipment for replacement items to avoid hospital or residential care admission Home Ownership for People with Long-Term Disabilities (HOLD) Project
- The HOLD Project, supports clients to purchase a home on a shared ownership (part rent / part buy) basis. 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.
- Telecare Hospital Discharge Pilot -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.