

Health and Care Strategy - Fit For My Future

Cabinet Member(s): Cllr Christine Lawrence – Cabinet Member for Public Health and Wellbeing

Division and Local Member(s): All

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	Seen by:	Name	Date
	County Solicitor	Honor Clarke	1/10/18
	Monitoring Officer	Scott Wooldridge	1/10/18
	Corporate Finance	Peter Lewis	1/10/18
	Human Resources	Chris Squire	1/10/18
	Property	Paula Hewitt / Claire Lovett	1/10/18
	Procurement / ICT	Simon Clifford	1/10/18
	Senior Manager	Trudi Grant	1/10/18
	Local Member(s)	All	
	Cabinet Member	Cllr Christine Lawrence	1/10/18
	Opposition Spokesperson	Cllr Amanda Broom	
	Relevant Scrutiny Chairman	Cllr Hazel Prior-Sankey	
Forward Plan Reference:	FP/18/09/02		
Summary:	This document presents an update on the latest Case for Change of the Health and Care Strategy 'Fit for my Future' which comes under the Sustainability and Transformation Plan (STP) for Somerset. The STP is a collaborative approach to recommissioning the health and care system in Somerset.		
Recommendations:	<p>That the Cabinet:</p> <ol style="list-style-type: none"> Endorses the approach taken in the Case for Change, Fit for My Future, and continued engagement with the development of the Sustainability and Transformation Plan. Delegates the Director of Public Health to lead progress on further engagement. 		
Reasons for Recommendations:	The Sustainability and Transformation Plan provides opportunities for multi-agency working to tackle some of the most pertinent challenges to delivery of the health and social		

	care in Somerset.
Links to County Vision, Business Plan and Medium Term Financial Strategy:	<p>County Vision and Business Plan links – Safer Communities > Stronger Communities element by increasing effectiveness of the Voluntary, Community and Social Enterprise sector to support healthy lifestyles and independence.</p> <p>Healthier Lives all elements with links to development of joint commissioning, improving mental health services, developing communities to support independence.</p> <p>Medium Term Financial Strategy This links to plans for the council to develop key partnership to deliver its aims and priorities. This offers potential economies of scale, reducing bureaucracy and duplication.</p> <p>Social Value Policy The STP process supports the Social Value Policy by taking a more joined up approach through partnership working with key agencies and interest groups.</p>
Consultations and co-production undertaken:	The draft Case for Change has been shared with over 700 stakeholders and members of the public. Public consultation events are a key factor in developing the Case for Change and proposals. Some engagement has been undertaken to date and a full public engagement programme is programmed to take place throughout the autumn.
Financial Implications:	Elements of public health and social care services are being referenced in the proposals but there is insufficient detail currently to really ascertain what is meant by several of the proposals. Resourcing requirements will be more fully understood as part of the development of the proposals going forwards.
Legal Implications:	No legal implications have been identified.
HR Implications:	At present no HR implications have been identified. These may become more apparent as part of the development of the proposals going forwards.
Risk Implications:	Development of a robust Health and Care Strategy is key to delivery of a financially sustainable Health Care System with a focus on prevention. Failure to deliver this could result in increasingly poor population physical and mental health, which would increase demand for social care with consequent financial pressures. If health services are cut due to cost pressures this may also increase demand on related local authority services. Local Authority Directorates which are touched upon by these

	<p>proposals should remain engaged to mitigate risks of unworkable plans being developed and to monitor implications for current services. Key areas which need to be involved include Public Health, Children’s Services specifically in social care and education and Adult Social Care.</p>				
	Likelihood	2	Impact	3	Risk Score 6
<p>Other Implications (including due regard implications):</p>	<p><u>Equalities Implications</u></p> <p>Full Impact Assessments will be completed when more detail emerges on each of the proposals. The strategy has an explicit focus to reduce inequalities. Some proposals look at inequalities in access across the general population; for example, due to proximity of services. There are also some proposals which are being developed to specifically address inequalities of some of the most vulnerable Somerset residents, such as those with learning disabilities.</p> <p><u>Community Safety Implications</u></p> <p>The proposals on neighbourhood level place-based care should have a positive impact on health and wellbeing and enhance community assets. There is a focus to reduce social isolation through the development of community services outside of formal funded care and increased awareness and usage of social prescribing.</p> <p><u>Sustainability Implications</u></p> <p>No sustainability implications have been identified.</p> <p><u>Health and Safety Implications</u></p> <p>The strategy is designed to have a positive impact on health and safety. Increasing resilience of communities will reduce risk when or if services are unable to be delivered, for example during inclement weather.</p> <p><u>Privacy Implications</u></p> <p>Development of technological solutions to facilitate greater sharing of care records have privacy implications. This work is being completed alongside more service / topic specific work. These workstreams are being monitored by experts in this area involved in overarching governance committees and at proposal level. Some of this work is considered business as usual so would continue regardless of local authority engagement.</p> <p><u>Health and Wellbeing Implications</u></p> <p>Engagement with the development of the STP should have a major positive impact on the health and wellbeing of the local population through development of innovative new approaches</p>				

	to delivery of health and care services and development of community infrastructure to promote healthier lifestyles resilience and self-care.
Scrutiny comments / recommendation (if any):	A paper on the development of the Somerset Health and Care Strategy came to Scrutiny for Policies, Children and Families Committee on 14 th September 2018.

1. Background

- 1.1.** “Fit for my Future” is the Health and Care Strategy which sits under the Sustainability and Transformation Plan (STP) for Somerset. It aims to ‘flip the system’ and change the way health and care services are commissioned and delivered to focus more on prevention, independence, community resilience and mental health and wellbeing. It also covers development of support in the community and personal development outside of formal services. It is being delivered through a partnership between Somerset County Council, Somerset Clinical Commissioning Group (CCG) and the major local NHS providers.
- 1.2.** Groups of clinicians and managers have been working together so that there is a better understanding of why we need to change, and the sorts of potential changes that should be worked up in detail. They have identified that there are many things we need to do differently if we are going to have the biggest possible positive impact on the health and the quality of life of Somerset people.
- 1.3.** The latest Case for Change (Version 3: 12th September 2018) covers some of the key challenges for Somerset as well as the principles driving development of the proposals. It includes brief summaries of proposals in the following areas:
- **Urgent and Emergency Care** including a single system for access, a network of urgent treatment centres and more community care to reduce demand on hospitals, review stroke services and other services considered vulnerable due to staffing and critical mass
 - **Proactive care for Long Term Conditions** including development of neighbourhood care teams which would include social care staff, stronger more proactive primary care, development of local communities to improve health and wellbeing, focus on frailty, end of life and diabetes
 - **Mental Health Services** aiming to increase capacity in services and also for personal resilience in crisis, and a focus on dementia
 - **Learning Disability Services** addressing some of the inequalities in access to general health services, support for crisis and improvements in residential placements.
 - **Maternity Services** review on best long term configuration for obstetrics, neonatal and maternity services.
 - **Children’s Services** review to enhance support for children and families and develop more integrated services
 - **Planned Care** including planned care for cancer, transforming how outpatients services are delivered, enhance diagnostic capacity and an innovative hospital based programme to tackle smoking dependence.

- 1.4. Somerset is a largely rural county with a population of 550,000 people, lacking large cities or universities. Its population is relatively older than the national average, and over the next 25 years while the overall population will rise by 15% those over the age of 75 to double. This provides a key driver for a significant rise in demand for health and care services
- 1.5. Over 25,000 people currently work within the health and care system in Somerset, supporting the population. However, the health and care system faces major challenges which need to be addressed now. Services are increasingly stretched, with demand outstripping capacity in many areas. Some services will not be viable in the future unless something changes, as it is increasingly difficult to recruit the expert staff to provide a safe service with a critical mass of patients. There are significant gaps in our services, for example in health and wellbeing, and in mental health. Alongside this, the system is already spending more than can be afforded.
- 1.6. While Somerset is relatively less deprived than other part of England there are areas with high levels of deprivation. People living in deprived areas in Somerset do not live as long as people from other areas; they are more likely to experience both physical and mental health issues. Deprivation not only impacts on the length of life but its quality. In many cases the differences with people from less deprived areas are linked to lifestyle and environmental factors, including smoking, obesity, housing, income, education and disability. Vulnerability is also often linked to deprivation and increases demand for health and social care.

2. Options considered and reasons for rejecting them

- 2.1. Engagement with the STP offers opportunities to contribute to the design of innovative improvements to service configuration to support the health and wellbeing of the local population. Some work proposals will be in commissioning areas also covered by local authority services and could impact on demand for services, efficiency and funding requirements
- 2.2. The local authority could choose not to engage in the STP discussions; however in doing so they would likely to miss the above opportunities and run the risk of being unsighted on proposals which may have implications for the demand and delivery of funded services.

3. Background Papers

- 3.1. "Fit for My Future" Case for Change and brief summary of considered proposals can be found at the following link:
<https://www.fitforourfuture.org.uk/download/105756/>

Somerset Equality Impact Assessment

Before completing this EIA please ensure you have read the EIA guidance notes – available from your Equality Officer

Version

Date

Description of what is being impact assessed

Evidence

What data/information have you used to assess how this policy/service might impact on protected groups? Sources such as the [Office of National Statistics](#), [Somerset Intelligence Partnership](#), [Somerset's Joint Strategic Needs Analysis \(JSNA\)](#), Staff and/ or [area profiles](#), should be detailed here

Who have you consulted with to assess possible impact on protected groups? If you have not consulted other people, please explain why?

Analysis of impact on protected groups

The Public Sector Equality Duty requires us to eliminate discrimination, advance equality of opportunity and foster good relations with protected groups. Consider how this policy/service will achieve these aims. In the table below, using the evidence outlined above and your own understanding, detail what considerations and potential impacts against each of the three aims of the Public Sector Equality Duty. Based on this information, make an assessment of the likely outcome, before you have implemented any mitigation.

Protected group	Summary of impact	Negative outcome	Neutral outcome	Positive outcome
Age	<ul style="list-style-type: none">	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability	<ul style="list-style-type: none">	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gender reassignment	<ul style="list-style-type: none">	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marriage and civil partnership	<ul style="list-style-type: none">	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pregnancy and maternity	•	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Race and ethnicity	•	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Religion or belief	•	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sex	•	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual orientation	•	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, e.g. carers, veterans, homeless, low income, rurality/isolation, etc.	•	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Negative outcomes action plan

Where you have ascertained that there will potentially be negative outcomes, you are required to mitigate the impact of these. Please detail below the actions that you intend to take.

Action taken/to be taken	Date	Person responsible	How will it be monitored?	Action complete
	Select date			<input type="checkbox"/>
	Select date			<input type="checkbox"/>
	Select date			<input type="checkbox"/>
	Select date			<input type="checkbox"/>
	Select date			<input type="checkbox"/>
	Select date			<input type="checkbox"/>
	Select date			<input type="checkbox"/>
	Select date			<input type="checkbox"/>
	Select date			<input type="checkbox"/>

If negative impacts remain, please provide an explanation below.

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Completed by:	
Date	
Signed off by:	

Date	
Equality Lead/Manager sign off date:	
To be reviewed by: (officer name)	
Review date:	

