

# Community Wellbeing Commissioning Strategy

2017 – 2020

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# Health and Wellbeing in Lincolnshire



Updated March 2017

## Introduction

The purpose of this commissioning strategy is to improve and protect the health and wellbeing of people in Lincolnshire. We think this can be best achieved when people are supported to be independent, make healthier choices and live healthier lives.

To achieve this we are committed to:

- Working with our partners, providers and the public to understand the needs of people living and working in Lincolnshire and the ability and capacity of our providers and partners to meet those needs;
- Involve our customers in the development of public health in Lincolnshire by adopting a co-production approach whilst being clear and explicit about what we can and cannot do for them;
- Improve outcomes for individuals by developing an overarching performance framework based on outcomes and manage everything we do through a clear and transparent set of operating procedures.

In order to achieve the purpose of the strategy we will take different approaches to different issues. In some cases we will want to buy specific, good value for money services for local people to help them overcome specific problems.

In other cases we will want to influence other organisations and local people to do things that are good for community wellbeing like advising the NHS on what services local people need.

Finally, we will work with other agencies which have a responsibility to protect people from diseases like cancer, environmental and biological hazards and emergencies to assure ourselves that their work is effective.



## Aim 1: People are supported to live healthier lifestyles

### Priorities

People understand how to maximise their wellbeing through making healthier choices about diet, smoking, alcohol and keeping active.

People with drug and alcohol problems are helped to reduce the harm they do to themselves and others and move towards living drug and alcohol free lives.

### Measures

Percentage of alcohol users that left drug treatment successfully who do not re-present to treatment within 6 months

People aged 40 to 74 offered and received an NHS health check

People supported to Stop Smoking

### We will commission:

- High Quality alcohol and drug treatment services
- Services which support people to recover from alcohol and drug misuse and lead meaningful and productive lives in society
- Stop smoking and tobacco control services that raise awareness about the harms of tobacco and encourage and support smokers to quit smoking
- NHS Health Checks to identify people at risk of stroke, kidney disease, heart disease, type 2 diabetes or dementia

- All of our services in such a way as to promote good mental wellbeing outcomes for people

### We will work with others to:

- Support the development of the Self Care Strategy to ensure people in Lincolnshire are empowered to improve and maintain their health and wellbeing
- Promote lifestyle interventions to contribute to the prevention of vascular dementia
- Promote responsible drinking and prevention alcohol and drug related harm
- Support targeted diabetes prevention programmes to support people to better manage their diabetes
- Prevent, identify and manage obesity within our population

## Aim 2: People are able to live life to the full and maximise their independence

### Priorities

We will work with others to help people access housing that supports their wellbeing and independence.

People will have access to information and resources that help them to take more care of themselves and their families.

People will have access to preventative services when their independence becomes challenged, including the Wellbeing Service; Community Equipment Services and help to access community and voluntary sector organisations.

### Measures

Percentage of people supported by the Wellbeing Service to improve their outcomes

People supported to sustain suitable housing

People supported by Integrated Community Equipment Services to improve their outcomes.

### We will commission:

- Housing related support services that continue to assist people to secure and maintain their independence in suitable housing

- A Wellbeing Service that enhances peoples wellbeing, and reduces or delays escalation to statutory health and care services
- Integrated Community Equipment Services

### We will work with others to:

- Progress the wider Housing for Independence agenda
- Develop a network of support services that tackle social isolation
- Provide co-ordinated falls prevention services to reduce the number of falls in older people
- Review and subsequent development of a falls prevention programme

## Aim 3: Peoples Health and Wellbeing is protected

### Priorities

We will work with others to support people at risk from domestic abuse to have access to a full range of prevention and support services, helping them to protect themselves from future harm.

We will work with other agencies to make sure local people are protected from infectious diseases through immunisation and vaccination and effective outbreak control.

We will work with other agencies to make sure local people have access to national screening programmes for diseases that can be better treated when found early.

We will work with other agencies to make sure that the NHS is able to respond effectively in times of emergency to support local people to avoid harm and return to normal as quickly as possible.

People have healthy sexual relationships and can access value for money services to support them to do so

### Measures

Chlamydia diagnoses (per 100,000 15-24 year olds)

### We will commission:

- An effective integrated sexual health service, doing so jointly with NHS England to ensure HIV treatment and care is also delivered as part of this service
- Domestic Abuse floating support services

### We will work with others to:

- Develop and implement joint clinical governance and assurance systems across the Council
- Review and improve the delivery of the Health Protection Framework for Lincolnshire
- Effectively protect the public from communicable disease and other hazards
- Support work to prepare for, respond to and recover from emergencies
- Seek and maintain assurance that immunisation and vaccination as well as screening programmes are effective in protecting the health of the public.

## Aim 4: Work with others to promote community wellbeing

### Priorities

We will identify the causes and potential causes of local people losing wellbeing and independence and promote action by others to address these.

We will provide advice to the NHS on what local people need to achieve the best possible health and wellbeing.

### Measures

Number of Health and Social Care staff trained in Making Every Contact Count (MECC)

### We will commission

- A Healthwatch Lincolnshire service which promote, support and enable the involvement of people in the commissioning, provision and scrutiny of local care services :
- A programme of work to support delivery of MECC across the health and care workforce

### We will work with others to:

- Review the use of the Public Health Grant in preparation for national changes to the ring-fence or mandation
- Promote further integration with the NHS through maximising opportunities to pool funding and co-commission across the health and care system

- Develop and implement a programme which continually improves the advice provided by the Council on protecting and improving the health of the population
- Develop a framework and resources that support evidence-based practice and decision-making across the Council and its partners
- Gain consensus for a focus on commissioning for children, moving towards a commissioning hub model
- Continue to improve and promote the public health role that the Council has under the Health and Social Care Act 2012
- Develop and support components of the STP where appropriate
- Analyse the health needs of the population through the Joint Strategic Needs Assessment and specific Health Needs Assessments
- Develop and implement the Joint Health and Wellbeing Strategy for Lincolnshire through supporting the work of the Health and Wellbeing Board
- Influence the NHS to commission weight management and smoking cessation services at scale for people on disease registers or receiving disease management interventions;
- Influence Sports England, Active Lincolnshire and leisure services to make Lincolnshire a great place for people to be active enough to make a difference to their own health

## Key Commissioned Activities

Lincolnshire County Council is committed to commissioning for outcomes based on our communities' needs and we commission a wide range of preventative and health based services within this commissioning strategy.

Customer, patient, service user and stakeholder engagement has been critical in developing these services from the needs analysis phase through to the procurement stages of commissioning.

As well as being responsible for directly commissioning services we also have a number of integrated commissioning arrangements with the NHS and DCLG.

The core commissioned services covered by this commissioning strategy are shown below

### Lincs Community Alcohol & Drug Treatment (£4.9m per annum)

Lincolnshire County Council is responsible for the commissioning of substance misuse treatment services across Lincolnshire. This is a holistic substance misuse system which started in October 2016 and aims to provide an integrated treatment system for drugs and alcohol which will more effectively meet the needs of the local population.

The treatment system will be outcome and recovery focused. The expectations for recovery and reintegration are explicit and characterised by the ability to motivate and support clients to achieve short and longer term goals and move through the

treatment system into mainstream health provision free from dependence.

The treatment service will be supported by the recovery service, which will wrap around treatment, offering support to people before, during and after treatment by building a recovery community across the county. It will provide a supportive environment to help those in recovery address any remaining issues as well as prevent those accessing recovery services from escalating their substance misuse to a level that may require formal treatment.

In 2016/17 the service delivered support to 2,938 people for drug and alcohol issues of which 494 people successfully completed their treatment during the year.

### Wellbeing Service (£4.4m per annum)

The Wellbeing service was launched in April 2014 and is a Countywide Service that forms part of a wider Wellbeing Network; focussing on Prevention and Early Intervention. Its focus is to bring together preventative services in order to develop a customer driven delivery model where individuals and communities are active in meeting their own care needs and supporting their independence. The programme has been a success for its users with over 90% of people receiving the service saying they would recommend it to others.

This approach offers service users tailored support to meet individual people's needs. People have access to a range of simple equipment aids for daily living, TeleCare, and other practical support at home. This applies whether that home is the family home or supported housing, rented or owned.

The Wellbeing Service includes five elements:

- Trusted Assessment;
- Installation of Equipment, Minor Adaptations and TeleCare installation;
- A Short Term Intervention of Generic Support;
- Resettlement / Home from hospital service;
- A Response Service.

The service is currently being recommissioned to ensure countywide consistency of the delivery model, key stakeholders are able to realise the full potential of the service and that it is embedded within key referral pathways. The new service will build upon the success of the first four years of this important service.

During 2016/17 the Wellbeing service undertook 5,399 assessments and delivered 8,885 units of support including generic support, telecare and small aids and adaptations. Of the users supported the Wellbeing Service improved 87% of outcomes identified including economic wellbeing, participation in work and training, establish social relationships, being healthy and staying safe.

**Lincolnshire Integrated Sexual Health Service (LISH)  
(total yearly spend £5.1m of which LCC contribution is £3.8m)**

We commission this service in collaboration with NHS England. The integrated sexual health and HIV service model aims to improve sexual health by providing access to services through 'one stop shops', where the majority of sexual health and contraceptive needs can be met at one site by one health professional.

HIV Diagnosis, therapy and support is provided in a variety of ways with a Section 75 Agreement in place with NHSE for Anti Retro Viral Therapy and individual and family support, alongside diagnosis, treatment and ongoing .

It also brings together level 2 and 3 GUM/HIV/sexual health and community contraception, psycho-sexual therapy (sexual health aspects), the National Chlamydia Screening programme and C Card for young people and sexual health promotion to provide one integrated sexual health service countywide.

75 GP practices are contracted to deliver Long Acting Reversible Contraception (LARC). This provides women in Lincolnshire with greater and more effective contraceptive choices such as Implants and Intra Uterine Devices. Advice on protection and prevention of transmission of STI's is provided as required.

Lincolnshire Sexual Health Services provided chlamydia tests to over 18,000 people aged 15-24 during 2016/17 (21% of the population in that age group). Finding positive results in 9.1% of cases resulted in a detection rate (per 100,000 people) of 1,941 which is the 3<sup>rd</sup> best detection rate amongst our 15 other comparator local authority areas and is a better detection rate than both East Midlands and England rates during 2016/17.

**Housing Related Support Services (Total yearly spend £3.6m per annum of which LCC contribution is £3.1m)**

The accommodation based Housing Related Support services provide Emergency and Non-Emergency assistance to prevent vulnerable people from rough sleeping and experiencing homelessness. The service(s) are required to meet an individual's

immediate housing need that may have arisen due to an emergency or crisis situation, supporting them to regain their independence.

Working alongside the accommodation based support is the Countywide Floating support service. The floating support service works across all housing tenures within the County to enable people with a range of support needs to maintain and sustain their accommodation and independence and/ or gain access to independent accommodation. This service also works with rough sleepers throughout the County to support them off the streets into accommodation, and connects them with other support services.

This commissioned service also provides domestic abuse refuge accommodation which delivers housing related support to those aged 16 and over experiencing or at risk of domestic abuse who are unable to return to their own home. Refuge accommodation is delivered from existing purpose built accommodation located within East Lindsey and City of Lincoln.

A social impact bond is currently being delivered through the LCC commissioned Housing Related Support contract. This is fully funded by DCLG and payment is linked to outcomes achieved for entrenched rough sleepers within the service (estimated total value is £1.3m).

During 2016/17 Housing Related Support services supported a total of 2,494 people of which 396 were supported via our commissioned rough sleeper service, 934 were supported in accommodation based services and 1,164 were supported within Floating Support services. Within all of these services 93% of people were supported to achieve their identified outcomes.

### **Domestic Abuse Floating Support Services (£517k per annum)**

We commission a Domestic Abuse Support Service which works with standard and medium risk victims of domestic abuse across the County (using the Domestic Abuse, Stalking and Harassment (DASH 2009) risk assessment tool). The aim of the service is to ensure that all victims of domestic abuse are able to access services in their local area in order to support early intervention and enable victims to live their lives free of controlling, coercive or threatening behaviour, violence, abuse or even death.

The services work across a wider domestic abuse network including the domestic abuse refuge element of the housing related support services.

These services supported 1,783 people of which 96% of identified outcomes were achieved for users.

### **Stop Smoking Services (£1.1m per annum)**

To support people who are seeking to quit smoking we commission a community dispersed tiered model of provision encompassing a core service and engagement with a network of sub-contracted providers providing behavioural interventions linked with pharmacological supplies. Across the county over 170 practitioners through 90 sites support nearly 5,000 people annually to try and stop smoking

The central functions include:

- Co-ordination, support and administration of core and network activities

- Management and responsibility of core team of specialist smoking cessation advisers
- Networked smoking cessation with affiliated/contracted providers
- Hub telephone support
- Training – professional development, brief interventions and service awareness
- Promotions and social marketing initiatives.

Tobacco control related activity that supports the smoking quit targets is primarily the Smoke Free Homes & Cars programme; this encompasses working with partners:

- To refer clients to smoking cessation services, fire service, etc.
- To engage the public to make their homes and their vehicles smoke-free

### **Healthwatch (£300k per annum)**

Lincolnshire County Council commission a local Healthwatch as a requirement of The Health and Social Care Act 2012. Local Healthwatch organisations, whilst not statutory bodies, have statutory duties and powers under the Act to promote and support the involvement of people in the commissioning, provision and scrutiny of local care services; enable people to monitor standards of local care services and whether, and how, these can be improved; obtain the views of people about their needs for, and their experiences of, local care services; and make views, reports and recommendations about how local care services could or ought

to be improved, to persons responsible for commissioning, providing, managing or scrutinising local care services.

In 2016/17 Healthwatch Lincolnshire had 462 members (either associated or full members) and had 96,000 contacts with residents in Lincolnshire including through promotional activities, website contacts, surveys and questionnaires and social media contacts. One of the most important roles of Healthwatch Lincolnshire is to ask health and care service providers what changes they are putting in place as a result of patient and carer feedback. This is undertaken on a regular basis to allow the tracking of the impact Healthwatch Lincolnshire are having on service developments, commissioning and delivery.

### **Integrated Community Equipment Services (Total yearly spend £5.8m of which £2.7m is LCC contribution)**

ICES is an Integrated Community Equipment Service which incorporates several strategic partner organisations including Lincolnshire CCGs, Lincolnshire Community Health Trust, United Lincolnshire Hospital Trust, Lincolnshire Partnership Foundation Trust and Lincolnshire County Council.

The service provides equipment to people of all ages (including children) to enable them to be more independent in their lives whilst living in the community within county of Lincolnshire. ICES also subcontract the telecare monitoring provision and will take on responsibility for installing telecare equipment from 1st April 2018.

In 2016/17 Adult Care received 3,000 requests from new clients for ongoing low level support (this includes equipment, telecare and

professional support). During 2016/17 4,800 people in total received ongoing low level support.

### **NHS Health Checks (£734k per annum)**

The 'NHS Health Check' Programme is a mandated service that the Council must commission as part of its public health functions. The Health Check itself offers preventative checks to people aged 40-74 years to assess their risk of vascular disease (heart disease, stroke, diabetes and kidney disease) followed by appropriate management and intervention, e.g. medical intervention and/or referral and signposting to lifestyle services.

One fifth of the eligible population is invited each year and the cycle repeats every 5 years. Our targets are to remain on track to invite 100% of our eligible population by the end of the first 5 year cycle and to show an improvement in uptake year on year. This performance is reported directly to Public Health England and forms part of Lincolnshire County Councils quarterly performance updates.

In 2016/17 41,835 people were offered an NHS Health Check in Lincolnshire of which 28,414 people received a check. 68% of people receiving the NHS Health Check is significantly higher level of performance than either the England level (50%), East Midlands (58%) and the average of our comparator local authority areas (51%).

## Measuring the impact our services have

Our commissioned services are monitored through robust contract and performance management arrangements, which include service reviews and understanding people's experience of services. All of our commissioned services include a full range of key performance indicators through which we ensure providers deliver cost effective services and achieve good outcomes for people. The specific measures included in the Community Wellbeing Commissioning Strategy reflect the key outcome measures as set out in the Council Business Plan.

How we decide what measures to track is based on a performance framework that includes some core principles such as we collect performance information which is primarily driven by 'outcomes', we only collect performance data that is absolutely necessary either due to legal requirements or based on clear business need, that we undertake a robust feasibility and baselining assessment including involvement of key stakeholders where appropriate.

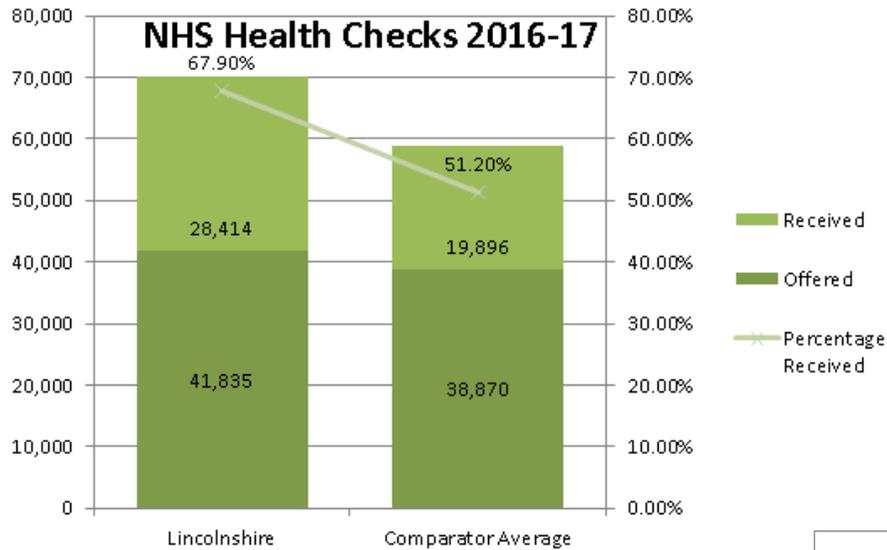
When we set our targets for this Community Wellbeing Commissioning Strategy and the Council Business Plan our approach is, wherever possible, evidence based, e.g. setting targets based on expert technical advice or published research evidence about what a good level of performance looks like.

Overall we strive to set and agree targets which are linked to a sound evidence base, are outcome focused and are focused on the key strategic objectives for the business which either aim to:

- Improve our performance
- Maintain our current performance
- Ensure our performance exceeds an acceptable baseline

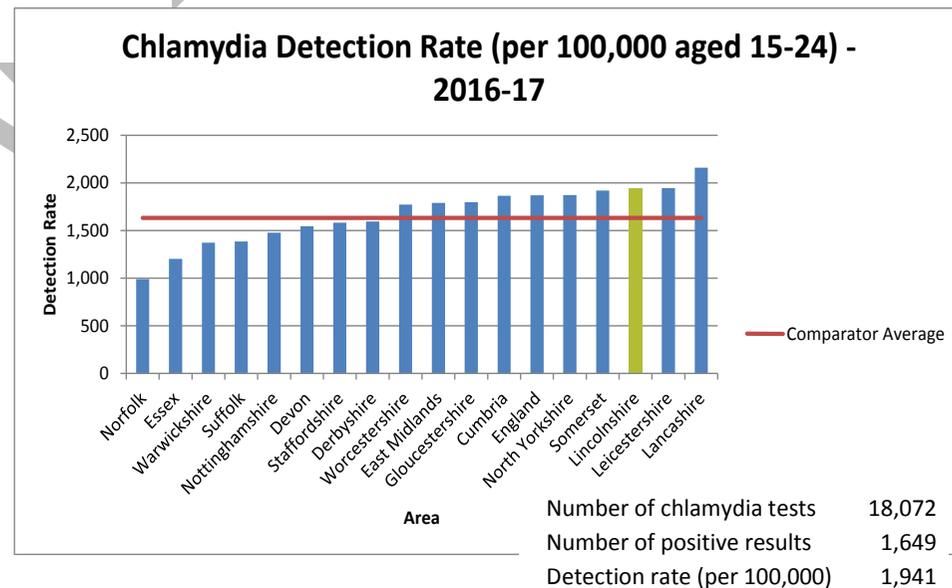
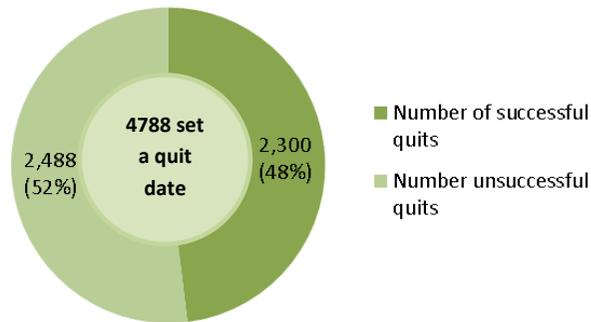
Some examples of how the services we commission are set out in the infographic below and further more detailed commentary is provided in the Council Business Plan And Performance Dashboard that is available on our Lincolnshire Research Observatory here: <http://www.research-lincs.org.uk/CBP-website-update.aspx>

# Community Wellbeing Commissioning Strategy



Wellbeing Service (2016/17)	
Assessments	5,399
Services provided	8,885
Outcomes achieved	16,253
Percentage of outcomes achieved	87%

### Stop Smoking Services 2016-17



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