

**EAST AYRSHIRE COMMUNITY HEALTH PARTNERSHIP**

**COMMITTEE MEETING**

**MONDAY 4<sup>th</sup> APRIL, 2011**

**REDESIGN OF THE COMMUNITY HEALTH IMPROVEMENT PARTNERSHIP (CHIP)**

**1. PURPOSE OF REPORT**

- 1.1 It is the purpose of this report to provide the membership of the Community Health Partnership Committee with information relating to the re-design of Community Health Improvement Partnership (CHIP) services in response to new funding allocations and new local and national priorities.

**2. BACKGROUND**

- 2.1 In 2008, following seven years of temporary external funding, CHIP was mainstreamed by East Ayrshire Council in partnership with NHS Ayrshire and Arran and became part of core Council business. The NHS Ayrshire & Arran funding arrangements necessitated the development of a Service Level Agreement which will conclude on 31<sup>st</sup> March 2011.
- 2.2 In a letter dated 29<sup>th</sup> October 2010 from the Director of Public Health, NHS Ayrshire and Arran, notification was given that the NHS Board would no longer be in a position to continue funding CHIP beyond the existing Service Level Agreement.
- 2.3 At its meeting on 17 November 2010, membership of the Officer Locality Group for Adults reached a consensus that CHIP was so important to Improving Health and Wellbeing services on a partnership basis in East Ayrshire that a re-prioritisation of existing budgets should take place and partners should seek to identify funding to sustain the service. Following the meeting the funding outlined below was subsequently allocated:
- The amount of £32,500 was allocated from East Ayrshire CHP for 2011/12 only;
  - The amount of £40,000 per annum was allocated from Choose Life.
- 2.4 In consideration of the range of services delivered in the community by CHIP which support rehab and enablement; community capacity building; and alcohol interventions, an undertaking was also given by members of the OLG to consider further allocations for the duration of the Re-shaping Care for Older People Change Fund (£55,000) and via Alcohol and Partnership Funds.

**3. PRIORITISED SERVICES**

- 3.1 Following consideration of the emerging local and national priorities and discussion amongst key partners including GPs, Community Care, and of course CHIP staff, specific priority service areas have been identified and are outlined below.

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- 3.2 **Mental Health and Well-being:** CHIP will support the work of the Mental Health and Learning Disability Partnership and in particular will lead the development of the East Ayrshire Choose Life Group. A range of services and interventions will be developed and delivered including: local Suicide Prevention campaigns; co-ordination and delivery of suicide prevention training in East Ayrshire for professionals and the public; a pilot initiative promoting positive mental health within Secondary Schools; and a package of individual support for those who have mild to moderate mental health problems – through home/community exercise, lifestyle and social interventions
- 3.3 **Alcohol and Drugs:** CHIP will support the work of East Ayrshire Alcohol and Drugs Partnership by providing interventions for adults recovering from addictions within community settings including local colleges, homeless accommodation and the prison. A range of support services and interventions will be delivered locally including: Alcohol Awareness Campaigns; delivery of Brief Interventions during contacts within communities with individuals/groups; improved signposting to and from support groups such as Alcoholics Anonymous, Alateen, Lighthouse Foundation, etc; and Individual support to individuals recovering from addictions ensuring links are developed with the Recovery Orientated System of Care – through community/home exercise, lifestyle and social interventions
- 3.4 **Older Adults:** CHIP will support transformational work around Re-shaping Care for Older People across three of the four workstreams of the change agenda viz: Promotion of Community Wellbeing, Sustaining Independence/ Supporting Self Management, and Integrated Rehab and Enablement Services. More specifically CHIP will deliver a range of services to enhance and maintain active lifestyles and well-being, and support capacity building in the wider older people's population including: Individual support to those with reduced mobility/complex circumstances – through home-based exercise, lifestyle and social interventions; delivery of exercise classes specifically for frailer older adults in supported accommodation and in the community with links to A & E, Rapid Response, outpatient physios, community alarms etc; Support capacity building in the community and within supported accommodation to identify potential mentors, volunteers and leaders of exercise and lifestyle programmes; enhanced links to nursing homes to identify training opportunities and develop improved partnerships and pathways to the community life.
- 3.5 **Community Outreach Programme:** CHIP will deliver weekly programmes of activity on a community outreach basis to support individuals adopt health behaviour change in particular encouraging increased participation in physical activity including: CHIP van visits, exercise classes and walking groups suitable for adults with long term conditions and who are at risk of falls; support younger adults leaving care and moving to their own tenancy with support to participate in health and social activities, practical healthy eating /cooking sessions and brief interventions around alcohol, smoking, activity levels, and sexual health.
- 3.6 **Intensive Volunteer Programme:** CHIP will work extensively to recruit, train and support a bank of new volunteers, mentors and leaders to support all elements of the new service including: Regular recruitment drives from within specific groups (e.g. retired, recovering etc) and the wider community; introduction of a comprehensive training calendar for volunteers with specific health and social interventions; promote the ethos of time banking where hours banked by individuals is rewarded with the offer of support, access to facilities, and training;

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further develop links with local colleges for younger volunteers and work experience placements; and promote and celebrate volunteer achievements through annual recognition events.

- 3.7 **Activity on Prescription:** Specifically utilising funding from NHS Ayrshire & Arran CHIP will introduce and deliver a new Activity Prescription Programme which will directly replace the existing lifestyle referral scheme. Activity on Prescription will provide a pathway for individuals to local opportunities to become more active and receive advice on positive lifestyle choices. More specifically: referrals will be accepted for individuals who have mild/moderate mental health problems, a learning disability, are frail elderly, have completed a rehabilitation, or are clinically obese; referrals will be co-ordinated centrally and classified into one of three possible levels which will determine the intensiveness of support required; a simplified prescription will be completed indicating the reason for referral and suggested activities/support required; structured follow ups will be implemented to identify progress and measure adherence and success.

## 4. OUTCOMES / COMMUNITY PLANNING

- 4.1 The redesigned services of CHIP have been specifically developed to contribute towards achievement of the following national outcomes: 'We live longer healthier lives' (Outcome 6); 'We have tackled significant inequalities in Scottish society' (Outcome 7); and 'We have strong, resilient and supportive communities where people take responsibility for their own actions and how they affect others' (Outcome 11).
- 4.2 Locally, the redesigned CHIP service will directly deliver on the following outcomes of the Improving Health and Wellbeing Action Plan 2011-15:
- Active, healthy lifestyles and positive behaviour change improved
  - Alcohol and drug related harm reduced
  - Impact of multiple deprivation and poverty on health and well-being of the most vulnerable individuals and communities addressed
  - Older people, vulnerable adults and their carers supported, included and empowered to live the healthiest life possible
- 4.3 With specific reference to the Reshaping Care for Older People Change Agenda, redesigned CHIP services will support achievement of a number of Personal Outcomes for Older People including:
- Improved experience and continuity of care
  - Care and support closer to home and in more homely settings
  - Enhanced independence, participation and wellbeing

## 5. FINANCIAL IMPLICATIONS

- 5.1 As outlined in sections 2.3 and 2.4 above, a revised funding package has been allocated to CHIP in order to support this redesign including £32,500 from NHS Ayrshire and Arran; £40,000 per annum from Choose Life; £55,000 from the Reshaping Care for Older People Change Fund (Awaiting Confirmation) and £120,000 from East Ayrshire Council Leisure Services.
- 5.2 The NHS Ayrshire & Arran funding allocation of £32,500 has not been confirmed beyond 2011/12. It should be noted that the Activity on Prescription element of

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the redesigned service is attributed to the NHS funding allocation and will require to be terminated should funding not continue.

### **6. CONCLUSION**

- 6.1 The work of the Community Health Improvement Partnership over the last ten years has been both highly successful and nationally acclaimed; however recent funding challenges have provided an opportunity for a robust and exciting redesign of the service to ensure sustainability and ability to deliver on key health and wellbeing outcomes for people living in East Ayrshire.

### **7. RECOMMENDATIONS**

7.1 It is recommended that members of the Community Health Partnership Committee:

- (i) Endorse the redesigned and prioritised services of CHIP as outlined at section three of this report, and approved by the Officer Locality Group
- (ii) Note the new funding allocations and implications as outlined at section five this report;
- (iii) Report points (i) and (ii) above, to the CHP Committee as per their instruction of 4<sup>th</sup> October 2010;
- (iv) Otherwise note the content of this report.

#### **LIST OF BACKGROUND PAPERS**

1. Community Health Partnership Committee Report -Year 1 SLA Progress - 18<sup>th</sup> May 2009
2. Community Health Partnership Committee Report -Year 2 SLA Progress - 17<sup>th</sup> May 2010
3. Minutes of Officer Locality Group for Adults 17 November 2010

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