

## HEALTH AND WEALTH BEING – JOINT STRATEGY 2013-2018: Our Priorities for action

<p><b>Vision: Longer healthier lives for everyone in Croydon</b></p>		
<p><b>Goals</b></p> <ol style="list-style-type: none"> <li>1. Increased healthy life expectancy and reduce difference in life expectancy between communities</li> <li>2. Increased resilience and independence</li> <li>3. A positive experience of care</li> </ol>		
<p><b>Improvement area 1: giving our children a good start in life</b></p> <ol style="list-style-type: none"> <li>1.1 Reduce low birth weight</li> <li>1.2 Increase breastfeeding initiation and prevalence</li> <li>1.3 Improve the uptake of childhood immunisations</li> <li>1.4 Reduce overweight and obesity in children</li> <li>1.5 Improve children’s emotional and mental wellbeing</li> <li>1.6 Reduce the proportion of children living in poverty</li> <li>1.7 Improve education attainment in disadvantaged groups</li> </ol>	<p><b>Improvement area 2: preventing illness and injury and helping people recover</b></p> <ol style="list-style-type: none"> <li>2.1 Reduce smoking prevalence</li> <li>2.2 Reduce overweight and obesity in adults</li> <li>2.3 Reduce the harm caused by alcohol misuse</li> <li>2.4 Early diagnosis and treatment of sexually transmitted infections including HIV infection</li> <li>2.5 Prevent illness and injury and promote recovery in the over 65s</li> </ol>	<p><b>Improvement area 3: preventing premature death and long term health conditions</b></p> <ol style="list-style-type: none"> <li>3.1 Early detection and management of people at risk for cardiovascular diseases and diabetes</li> <li>3.2 Early detection and treatment of cancers</li> </ol>
<p><b>Improvement area 4: supporting people to be resilient and independent</b></p> <ol style="list-style-type: none"> <li>4.1 Rehabilitation and re-ablement to prevent repeat admission to hospital</li> <li>4.2 integrated care and support for people with long term conditions</li> <li>4.3 Support and advice for carers</li> <li>4.4 Reduce the number of households living in temporary accommodation</li> <li>4.5 Reduce levels of worklessness and long term</li> </ol>	<p><b>Improvement area 5: providing integrated, safe, high quality services</b></p> <ol style="list-style-type: none"> <li>5.1 Redesign of mental health pathways</li> <li>5.2 Increased proportion of planned care delivered in community settings</li> <li>5.3 Redesign of urgent care pathways</li> <li>5.4 Improve the clinical quality and safety of health services</li> <li>5.5 Improve early detection, treatment and quality of care for people with dementia</li> </ol>	<p><b>Improvement area 6: improving people’s experience of care</b></p> <ol style="list-style-type: none"> <li>6.1 Improve end of life care</li> <li>6.2 Improve patient and service user satisfaction with health and social care services.</li> </ol>

HWBB Priority	<b>JOINT COMMISSIONING PRINCIPLES</b>		
<ul style="list-style-type: none"> <li>1, 2 &amp; 3</li> <li>5</li> <li>2, 3, 4 &amp; 6</li> <li>5 &amp; 6</li> <li>4</li> <li>2 &amp; 4</li> </ul>	<ul style="list-style-type: none"> <li>• Prevention and Early Intervention</li> <li>• Integration and joint working</li> <li>• Transformation</li> <li>• Outcome-based Commissioning</li> <li>• Personalisation</li> <li>• Recovery and Re-ablement</li> <li>• Value for Money</li> <li>• Engagement</li> <li>• Recognition of the needs of the whole person and family members.</li> </ul>		
<b>COMMISSIONING PRIORITIES</b>			
<b>JOINT</b>			
HWBB Priority		HWBB Priority	
<b>ADULTS</b>		<b>CHILDREN</b>	
<ul style="list-style-type: none"> <li>• 4 &amp; 5</li> <li>• 5.3</li> <li>• 4 &amp; 5</li> <li>• 5.1</li> <li>• 5.1</li> <li>• 5.1</li> <li>• 4.2</li> </ul>	<ul style="list-style-type: none"> <li>• Out of hospital care embedding of transformed community services.</li> <li>• Urgent Care: continued work on the improvement plan, demand and capacity across the whole system.</li> <li>• Effective Transition: Children's to Adult services.</li> <li>• Rebalancing Mental Health Acute and Community services.</li> <li>• Enhancing MH care in primary care.</li> <li>• Psychological Therapies</li> <li>• Commissioning and Supporting / facilitating a wide range of</li> </ul>	<ul style="list-style-type: none"> <li>• 1.5, 4.1, 4.1 &amp; 6.2</li> <li>• 1.3, 1.5 &amp; 1.7</li> <li>• 1.5, 1.6 1.7, 4.2 &amp; 6.2</li> <li>• 1.5, 1.6 &amp; 1.7</li> </ul>	<ul style="list-style-type: none"> <li>• Development and Implementation of Children's emotional health and well-being strategy.</li> <li>• Improving health, education and training outcomes for Looked After Children. <ul style="list-style-type: none"> <li>○ Timely provision of initial and follow up health care assessments.</li> <li>○ Introduction/development of a consistent mental health and wellbeing dimension to the initial assessment</li> <li>○ Improve immunisation uptake.</li> </ul> </li> <li>• Single Assessment and plan for children with Learning difficulties and disabilities including transition to adulthood.</li> <li>• Implementation of jointly commissioned Speech and Language Therapy services.</li> </ul>

<ul style="list-style-type: none"> <li>• 5.1</li> </ul>	<p>community-based services to reduce the need for unplanned hospital activity / admissions e.g. single point of assessment, rapid response, MDT in Primary Care</p> <ul style="list-style-type: none"> <li>• Ensure that the new MH strategy sets out a clear direction for commissioning a broad range of services, from acute to community based services – that enable people to take control of their lives, help them to prevent relapse and to sustain recovery and well-being.</li> <li>• Promote together the mental well-being and resilience of all Croydon’s population so that future demand for mental health services can be contained or reduced.</li> <li>• The CCG and Council will ensure that the requirements and actions from the Winterbourne View Concordat are in place within the timescales given, this will include assurance that up to date plans are in place and being actively managed for all relevant individuals.</li> </ul>	<ul style="list-style-type: none"> <li>• 1.3 – 1.7</li> <li>• 1.1 &amp; 1.2</li> </ul>	<ul style="list-style-type: none"> <li>• Implementing Outcome of School Nursing Commissioning Review.</li> <li>• Preparation for commissioning of health visiting and Family Nurse Partnership from 2015.</li> <li>• An overarching challenge will be meeting the health needs of increasing numbers of children.</li> </ul>
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## COMMISSIONING PRIORITIES

### SINGLE - CCG

HWBB Priority	ADULTS	HWBB Priority	CHILDREN
<ul style="list-style-type: none"> <li>• 5.2</li> <li>• 5.3</li> <li>• 4.5</li> <li>• 3.1</li> <li>• 4.2</li> <li>• 4.2</li> <li>• 3.1</li> <li>• 6.1</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Planned Care</b> – this includes:                             <ul style="list-style-type: none"> <li>○ Vascular Surgery</li> <li>○ Effective Commissioning Initiative</li> <li>○ First/Follow Up Ratios</li> <li>○ Ophthalmology</li> <li>○ Urology</li> <li>○ Gastroenterology</li> <li>○ MSK</li> <li>○ Dermatology</li> </ul> </li> <li>• <b>Urgent Care</b> <ul style="list-style-type: none"> <li>○ Stroke and Atrial Fibrillation</li> <li>○ Urgent Care Centre</li> <li>○ Non-elective activity from Nursing Homes</li> <li>○ DVT</li> </ul> </li> <li>• <b>Transformation/Community Services</b> <ul style="list-style-type: none"> <li>○ Adult Community services and Falls services</li> <li>○ Cardiology</li> <li>○ Anti-Coagulation</li> <li>○ COPD</li> <li>○ Diabetes</li> <li>○ End of Life Care</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• 4.2, 4.3, 5.4, 6.1 &amp; 6.2</li> <li>• 4.2, 4.3, 5.2 &amp; 5.4</li> <li>• 1.1,1.2, 2.1, 2.3, 5.4 &amp; 6.2</li> </ul>	<ul style="list-style-type: none"> <li>• Improvement of procurement processes for children with continuing health care needs to drive up quality and safety.</li> <li>• Implement a pathfinder project to improve service access for children with asthma and to drive up quality, safety and efficiency.</li> <li>• Complete the implementation of increased numbers of midwives to support improved outcomes in pregnancy and beyond.</li> </ul>

<ul style="list-style-type: none"> <li>• 5.4</li> <li>• 5.4</li> <li>• 5.2</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Primary Care</b> <ul style="list-style-type: none"> <li>○ Medicines Optimisation</li> <li>○ Variation across Practices</li> <li>○ Hub and Spoke Model</li> </ul> </li> </ul>		
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<b>COMMISSIONING PRIORITIES</b>			
<b>SINGLE - COUNCIL</b>			
<b>HWBB Priority</b>			<b>HWBB Priority</b>
	<b>LA – ADULTS</b>		<b>LA – CHILDREN</b>
	<ul style="list-style-type: none"> <li>• We will maintain our joint commissioning approach to improving the physical and emotional health and psychological well-being of people with LD by supporting primary care, hospital services and residential providers with the appropriate knowledge and skills to meet users’ and commissioners’ expectations.</li> <li>• Commissioning of a redesigned substance misuse treatment system in summer 2014, that builds on the principles of an integrated system but with a greater focus on bespoke personalised options which address a wider range of substances than opiates.</li> </ul>	<ul style="list-style-type: none"> <li>• 1.4.</li> <li>• 1.6</li> <li>• 1.5</li> <li>• 1.7</li> <li>• 1.7, 4.5</li> </ul>	<ul style="list-style-type: none"> <li>• Reduce childhood obesity through re-commissioning of the weight management contract, led by PH.</li> <li>• Reduce child poverty and mitigate impact of poverty through driving the implementation of the child poverty strategy including joint working with schools on pupil premium and free school meals.</li> <li>• Reduce bullying and strengthen the engagement of children, young people and families across the C&amp;F Partnership.</li> <li>• Close the gaps in education achievement and improve stage 2 attainment overall through joint working with schools.</li> <li>• Increase participation in education, employment and training and improve outcomes at age 19</li> <li>• Increase impact of early intervention</li> </ul>

<ul style="list-style-type: none"> <li>• 6</li> </ul>	<ul style="list-style-type: none"> <li>• Continue the well established joint approach of commissioning supported housing services which enable people to stay out of institutional care or to move from it into more independent tenancies. There will be a particular focus on those models of supported housing where the evidence shows people’s health and well-being can be maintained with less call on NHS provision (e.g. assistive technology, peer support).</li> <li>• Through a framework agreement, put in place new types of contract agreement with the third and private sectors for the delivery of quality VFM personal care, support, reablement and end of life services for people in their own homes.</li> <li>• Commissioning together so that CHC provision delivered in residential settings optimises efficiencies and sustains good quality.</li> <li>• By re-commissioning Croydon’s information, advice and advocacy services, we will create a single network in the third sector to provide coordinated and consistent information which will be a resource for Croydon people and Croydon professionals.</li> <li>• We will implement the Older People housing strategy by developing proposals for additional extra care housing and by re-designing support services in a range of housing projects for older people.</li> </ul>	<ul style="list-style-type: none"> <li>• 1.7</li> <li>• 1.7</li> </ul>	<ul style="list-style-type: none"> <li>• Improve outcomes for children and young people with learning difficulties/disabilities</li> <li>• Ensure that children are safe from maltreatment, neglect and abuse (Croydon Safeguarding Children Board) and continue to strengthen children’s social care</li> </ul>
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<ul style="list-style-type: none"><li>• 4.4</li></ul>	<ul style="list-style-type: none"><li>• Ensure the refreshed S75 for the management and delivery of the Council's MH staff and service responsibilities is completed.</li><li>• We will commission "Shared Lives" to develop a range of support options which enable Shared Lives householders to assist their lodgers to move on to greater independence.</li><li>• Sustain commissioning of cost effective services for eligible people without recourse to public funds (Adults and Families) and work in close collaboration with the Home Office and other partners to fulfil national policy requirements.</li></ul>		
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