

10 November 2016 at 7.00 pm

**Conference Room, Argyle Road, Sevenoaks
Despatched: 08 November 2016**



Cabinet

Supplementary Agenda

Further to the recent despatch of agenda and papers for the above meeting, please find the following items which were marked as 'to follow':

		Pages	Contact
6.	Environmental Health Partnership - Charging For Food Hygiene Re-Rating Inspections	(Pages 1 - 2)	Annie Sargent Tel: 1322343085
7.	Annual Review of Parking Charges 2017 - 18	(Pages 3 - 4)	John Strachan Tel: 01732227310
8.	Christmas Parking 2016	(Pages 5 - 6)	John Strachan Tel: 1732227310
9.	Public Health (Preventative Services) Devolution	(Pages 7 - 36)	Lesley Bowles Tel: 01732 227335

Reason for urgency: The report was delayed awaiting information on governance and the Chairman has agreed to it being taken as an urgent matter in order to meet West Kent timescales.

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Item 7 - Environmental Health Partnership - charging for food hygiene re-rating inspections

The attached report was considered by the Direct & Trading Advisory Committee on 1 November 2016, relevant Minute extract below:

Direct & Trading Advisory Committee on 1 November 2016 (Minute 15)

The Environmental Health Manager presented a report which provided Members with an overview of the Food Standards Agency's (FSA) proposal to introduce a change to the National Food Hygiene Rating scheme. The purpose of the pilot was to trial charging food businesses when they requested a re-rating inspection following an initial food hygiene inspection rating. The charge would be based on cost recovery and would be calculated on the average cost that the Council currently incurred for the provision of the service. The pilot would operate for a period of 3 months and the Food Standards Agency would use the data collected to introduce a National Charging Scheme in 2017.

Since the publication of the report, the Environmental Health Manager advised that she had received confirmation that the FSA did intend this to be ongoing.

Resolved: That it be recommended to Cabinet that

- a) the Environmental Health's team participation in the Food Standards Agency pilot of charging businesses for a food hygiene re-rating inspection, be noted;
- b) the fee for a food hygiene re-rating inspection be set at £200 for the period of the Food Standards Agency pilot; and
- c) if the pilot was successful, and with the support of the Food Standards Agency, charging be continued on a cost recovery basis.

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Item 8 - Annual Review of Parking Charges 2017-18

The attached report was considered by the Direct & Trading Advisory Committee on 1 November 2016, relevant Minute extract below:

Direct & Trading Advisory Committee on 1 November 2016 (Minute 16)

The Parking Manager presented the annual review of parking charges for 2017-18 report. It proposed consultation on revised tariffs in the Council's off-street car parks and in on-street pay and display parking bays.

Public Sector Equality Duty

Members noted that consideration had been given to impacts under the Public Sector Equality Duty.

Resolved: That the proposals for revised parking charges for 2017-18 be recommended to Cabinet for consultation.

Replacement Page 89

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Item 9 - Christmas Parking 2016

The attached report was considered by the Direct & Trading Advisory Committee on 1 November 2016, relevant Minute extract below:

Direct & Trading Advisory Committee on 1 November 2016 (Minute 17)

Members considered the report which requested that the Committee consider free concessionary parking on select dates at Christmas 2016. Members were advised that, as in previous years, the Council's Portfolio Holder for Direct and Trading had allowed free evening parking for Christmas Lights and shopping events in Sevenoaks on Friday 25 November 2016 and in Westerham on Thursday 24 November 2016.

Public Sector Equality Duty

Members noted that consideration had been given to impacts under the Public Sector Equality Duty.

Resolved: That it be recommended to Cabinet that

- a) free parking be provided in car parks and on street parking bays for two Saturdays, 10 and 17 December 2016 preceding Christmas; and
- b) subject to recommendation (a) above, it be recommended to Council that the cost in terms of lost income for free Christmas parking be funded from Supplementary Estimates.

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Item 6 - Public Health (Preventative Services) Devolution

PLEASE NOTE: Cabinet are not being asked to consider the recommendation below from the Housing & Health Advisory Committee.

This is for INFORMATION ONLY.

A report on Public Health (Preventative Services) Devolution was considered by the Housing & Health Advisory Committee on 4 October 2016 but the attached report is a different report with further information than that which was available and considered at the Advisory Committee. The report considered by the Advisory Committee is available [online](#) and the relevant minute extract below is for information purposes only:

Housing and Health Advisory Committee on 4 October 2016 (Minute 27)

The Chief Officer Communities and Business presented the report which gave details of the proposed devolution arrangement for Public Health and Health Improvement in partnership with Kent County Council, Tonbridge & Malling and Tunbridge Wells Borough Councils.

Public Sector Equality Duty

Members noted that consideration had been given to impacts under the Public Sector Equality Duty.

Resolved: That it be recommended to Cabinet that

- a) the principles of the West Kent Public Health Preventative Services devolution model, be approved; and
- b) the Partnership Agreement, as set out in the Annex to the report, be approved.

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DEVOLUTION OF PUBLIC HEALTH (PREVENTATIVE SERVICES)

Cabinet - 10 November 2016

Report of Chief Officer Communities & Business

Status: For Decision

Key Decision: Yes

Executive Summary: This report sets out proposed arrangements for an integrated approach towards public health (preventative services) across West Kent between Kent County Council, this Council and Tonbridge & Malling and Tunbridge Wells Borough Councils.

These arrangements include using Kent County Council public health preventative service budgets to deliver agreed health outcomes and use District and Borough Councils' existing health-related resources in a way that complements the agreed outcomes, consistent with the West Kent Health Deal approach.

It enables District and Borough Councils to play a full role in the co-ordination of and provision of some, local services relating to health improvement, ensuring that services address local needs and are co-ordinated with other local delivery

It also enables District and Borough Councils to play a full role in and be equal partners in the procurement of health improvement services previously procured by Kent County Council, ensuring that the needs of local residents are addressed;

The proposals respond to the King's Fund report highlighting the role of district councils in health and to the West Kent Health Deal.

This report supports the Key Aim of Healthy Communities

Portfolio Holder Cllr. Michelle Lowe

Contact Officer Lesley Bowles, Ext 7335

Recommendation to Cabinet:

- i) To approve the approach, principles and district council role in the West Kent Public Health Preventative Services devolution model set out in this report;
- ii) A partnership agreement between Kent County Council, Sevenoaks District Council, Tonbridge and Malling and Tunbridge Wells Borough Councils be developed as a basis to work together to deliver the West Kent Public Health Preventative Services devolution model over the three years 2017/18 to

2019/20;

- iii) The principle of the governance arrangements set out in this report be endorsed and the approval of detailed matters (including a partnership agreement) be delegated to the Leader and Portfolio Holder for Housing & Health in consultation with the Chief Officer, Communities & Business.

Reason for recommendation: This will enable the Council to act in the best interests of its residents in the provision of local health improvement activity.

Introduction and Background

- 1 Kent County Council has a statutory duty to deliver the Public Health function, in partnership with others, to improve the health and wellbeing of Kent residents and reduce health inequalities. All Councils have a duty to plan for the health and wellbeing of the residents they serve. District and Borough Councils have a role to play in delivering health protection, health improvement and key services to address the wider determinants of health.
- 2 The 2015 King's Fund report 'The District Council Contribution to Public Health: a time of challenge and opportunity' looked at the opportunities for District and County Councils to work together holistically to deliver the public health agenda. The report demonstrates that 'district councils are in a good position to influence many factors of good health through their key functions' and describes a 'radical upgrade in prevention'.
- 3 Earlier this year, the three districts and boroughs developed a West Kent Health Deal, setting out a vision for the three Councils' roles in health going forward. This is attached at Appendix A.
- 4 The County Council's new countywide preventative service strategy is to offer seamless support to individuals who need to make change, to help motivate change, make the change and then maintain the change. Their aim is to do this through a service based around the individual and this approach is supported by the district and borough councils.
- 5 The County Council's public health team propose to start the procurement process in Autumn 2016. A report to the County Council's Adult Social Care and Health Cabinet Committee on 12th July 2016 sought endorsement of re-commissioning and the competitive tendering of a new model.
- 6 The report said '*There is clear scope for partners (including health commissioners and district /borough councils) to work in partnership to drive better integration of services that contribute to improving Public Health outcomes. This transformation and re-commissioning will support this work to improve the health of Kent residents and reduce health inequalities.*'
- 7 '**Work with Districts:** *District Councils play a significant role in delivering core public health outcomes and understand local communities' needs.*

Work is being developed across the County and there is a specific programme of work in West Kent to re-model our approach with stronger working and better utilisation of resource across the County Council and 3 District Councils. This closer collaborative working will make better use of the diminishing preventative resources collectively and inform the development of the model more widely across the County.'

West Kent Integration Board

- 8 The West Kent Board was set up in response to the Government's devolution agenda. It is made up of the leaders of the four Councils, Kent, Sevenoaks, Tonbridge & Malling and Tunbridge Wells. Meetings are also attended by the three Chief Executives and two Officers from the County Council.
- 9 The Board aims to retain the individual sovereignty of the four councils, save money by taking out waste and duplication and develop structures that enable services to be co-commissioned, delegated or devolved.
- 10 The Board is currently operating in shadow format and has set up a range of working groups focussing on different issues where it is thought that better integrated working between the two tiers of government could have local benefits. Priority was given to opportunities where there was consensus across the four authorities, the risks were low and benefits high. One of the groups was set up to focus on arrangements for public health (preventative services).

Proposed West Kent Health Improvement Model

APPROACH

- 11 In response to the West Kent Integration Board's intention to work together on Public Health (Preventative Services) an Officer Working Group was set up. Through the group the following approach has been developed:
 - a) Transparency of spend - with all parties sharing the detail of £2m current spend (£1m KCC, £1m district spend) and developing a 3 stage model to structure more efficient and effective delivery. The 3 stages that the collaboration will focus on, are :
 - Motivate change
 - Make/support change
 - Maintain change
 - b) The development of the "district deal", pioneered by Cllr Lowe in Sevenoaks District council, which outlines how districts can more systematically integrate health into all their work including through all of their policies and their wider service provision.

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- c) An intelligence led approach ensuring that there is a focus in the districts on those communities in which there are the highest health inequalities. This will mean a more local approach, focusing the resource in particular wards where there are high rates, or local intelligence that suggests high prevalence of core health issues e.g. smoking/mental health issues/high levels of alcohol or drug misuse or higher levels of obesity.
- d) A co-commissioning approach:
A county procurement for a new adult health improvement service was delayed for 6 months to give time for this work to be developed and approved. Part of the focus of the work in West Kent has been to reshape the connection between this procurement and the devolution new model. This has resulted in a bespoke model for the 3 districts/boroughs which will mean that the districts/boroughs provide the function of accepting referrals and assessing the need. This function will then signpost the person to the most appropriate service. The advantage of this approach is that it will ensure a more holistic assessment of need, particularly picking up where there are connected issues with health such as debt, unemployment or housing related issues. This is a potentially hugely exciting model offering the opportunity to integrate all sorts of assessment functions over time and to support a shared intelligence approach to directing resource which supports people to change.

The model also means that people may not need to go to the adult health improvement service, but instead could directly access leisure provision or other district provision and enjoy a more sustainable level of support.

PRINCIPLES

- 12 The proposed West Kent Health Improvement Model is informed by the King's Fund report and the West Kent Health Deal. The model provides for the four councils to manage their collective resources in a way that not only generates best value for money and delivers against outcomes but also provides a platform for further integrated working that delivers longer-term health solutions.
- 13 The West Kent Integration Board, made up of the four councils, should be the decision-making body for the County Council's health preventative services budget in West Kent through a co-commissioning process. The Board should agree the budget, outcomes and principles, set out in a Partnership Agreement.
- 14 District and Borough Council resources that currently have the potential to have a positive impact on local health and wellbeing should, wherever possible, be used in a way that complements the agreed outcomes,

consistent with the West Kent Health Deal approach. These resources are set out in Appendix B.

- 15 A Health Improvement Partnership Board, made up of Health Portfolio Holders from each of the councils with supporting Officers from each Council, should be established to oversee the delivery arrangements.
- 16 The Board will work to ensure that maximum value for money and effectiveness is provided. Where it is jointly agreed, through a co-commissioning process, that a service should be externally procured, all four councils will play an equal role in the specification and evaluation processes.
- 17 The Board will work to see if further efficiencies can be made over the next 3 to 5 years.
- 18 The agreed health outcomes should relate to the health priorities of all four councils and may change over time as local needs change.
- 19 District and Borough Councils will, through a local hub model, play a full role in the co-ordination and delivery of the local public health (preventative services) provision, ensuring that services address local needs and are co-ordinated with other local delivery;
- 20 It is envisaged that there should be one single referral point for the three Districts that feeds into a Local Hub for each district or borough. This may not be a physical hub but enables a holistic assessment of individual needs and considers the wider determinants of health such as debt, housing and community provision. Co-location of locally procured services within the District and Borough Council offices will enable the integration of this new assessment function and make for efficiencies in delivery and better outcomes for the customer.
- 21 District, Borough and County Councils should work together to bring the necessary range of skills and experience together to bear on the delivery of the Partnership Agreement.
- 22 It is recognised that delivery models may change over time but it is likely that Partnership Agreements will last for a minimum of three years in line with the commissioning timescales. The delivery model should provide for arrangements to be responsive to changing needs

THE DISTRICT/BOROUGH ROLE

- 23 The proposed West Kent model provides for the three district/borough councils to play a major role by:
 - i. Forming a health hub in each district that is the focus of co-ordinated health activity in the community
 - ii. Managing referrals and signposting to local opportunities and services;

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- iii. Understanding local need, gaps and resources, working with local organisations and communities to address those needs;
- iv. Co-ordinating local promotion through community events, communicating health messages, using In Shape
- v. Setting up local opportunities such as health walks, sports development and community activity;
- vi. Boosting capacity through training and community networks;
- vii. Improving use of local community provision;
- viii. Influencing through Council policy;
- ix. Using our core services to influence the wider determinants of health, eg through housing, planning, environmental health, community safety and others;
- x. Using our existing core and externally funded programmes to have an impact on the agreed health outcomes. For example, creating ‘healthy HERO’ by training HERO officers to recognise when signposting to health services is appropriate, targeting sports development activity towards areas of highest health inequality, ensuring that community safety activity makes appropriate drugs and alcohol referrals, ensuring that our grants to voluntary organisations support those working to improve health;
- xi. Working with KCC to decide which specialist health improvement services should be procured and to jointly procure those services;
- xii. Where specialist services are procured, ensuring that they are part of the health hub and are linked in to community and GP services, and
- xiii. In addition, the County Council’s countywide strategy is to offer seamless support to individuals who need to make change, to help motivate change, make the change and then maintain the change. Their aim is to do this through a service based around the individual, accessed via a website linked to the national One You campaign. Their approach is to offer a more holistic service around the individual rather than providing services in silos. How this service is provided is the subject of current consideration by the 4 councils’ health officers, including how this will link to the local health hub and how this will be managed locally.

Key Implications

Financial

- 24 The three West Kent districts/boroughs spend about £1million per year in total on activity that can have a positive impact on health. For Sevenoaks, this includes Disabled Facilities Grants, grants to voluntary organisations, health promotion through In Shape, HERO, Stay Safe dementia scheme,

domestic abuse and other small projects. There is no formal commitment from the district/borough councils to continue to fund this activity. However, the new integrated arrangements offer scope to enhance the work that this Council funds to ensure that maximum benefit and value for money is obtained to make the funding work harder and smarter.

- 25 There is no commitment to any additional funding on the part of the District Council as part of this agreement.
- 26 Currently, KCC spends about £1million each year on public health preventative services. This includes £121,000 which is paid to Sevenoaks District Council to deliver health improvement work. Similar sums are paid to Tonbridge & Malling and Tunbridge Wells. They also spend £10,000 per year on a Workplace Health project, delivered by Environmental Health, £25,000 on Winter Warmth, delivered through the Housing Standards team. These sums have reduced over time.
- 27 KCC also procures services such as smoking cessation, health trainers, campaigns and postural stability from other providers.
- 28 The KCC funding arrangements will end early next year and will be replaced by Partnership Agreements between the County Councils and District Councils.

Value for Money

- 29 Value for Money will be provided through:
 - a) A saving of 7.5% already made in the KCC public health (preventative services) budget with no corresponding reduction in outcomes.
 - b) The three West Kent districts/boroughs also spend at least £1million per year in total on activity that can have a positive impact on health. This includes, for example, Disabled Facilities Grants, grants to voluntary organisations, health promotion through local publicity and campaigns, debt advice, community safety schemes aimed at the vulnerable or those with dementia, domestic abuse and other small projects. Budgets for these services are determined annually by the district/borough councils. It is proposed that these budgets continue to fund such community activity but that a focus on health improvement is prioritised alongside the priorities of the individual schemes in order to help deliver the agreed health outcomes. These budgets may reduce over time but should continue at least at a level that matches the County Council public health preventative services budget for West Kent. The new integrated arrangements offer scope to enhance this work to ensure that maximum benefit and value for money is obtained, to make the funding work harder and smarter and ensure linkages with the three local Health Hubs.
 - c) Additional activity is undertaken, as set out in the West Kent Health Deal, focussed on health improvements.

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- 30 By adopting the proposed model the overall contribution to public health preventative services can be reduced over time whilst at the same time significantly increasing the impact of the funding.

Legal Implications and Risk Assessment Statement.

- 31 These arrangements rely on working in partnership. The current working arrangements rely on a strong partnership approach developed with the West Kent Integration Board which will be supported by subject based Partnership Boards. Governance arrangements will be the subject of further work to establish detailed terms and responsibilities.

Equality Assessment

- 32 Members are reminded of the requirement, under the Public Sector Equality Duty (section 149 of the Equality Act 2010) to have due regard to (i) eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010, (ii) advance equality of opportunity between people from different groups, and (iii) foster good relations between people from different groups. The decisions recommended through this paper directly impact on end users. The impact has been analysed and does not vary between groups of people. The results of this analysis are set out immediately below.

- 33 The proposed devolution arrangements will provide improvements on existing services that target health inequalities that will offer more opportunities for residents to access services. Where age restrictions apply to certain activities offered, residents can be signposted to alternative services. Some restrictions may apply to those who are pregnant. In these cases, medical advice would be sought and alternative services found. Events and activities are open to all and where restrictions apply, due to the nature of the services provided, we will direct people to alternative services to meet their needs.

Safeguarding Children and Vulnerable Adults

- 34 This activity will conform to the Council's Safeguarding Policy. Any procurement that is undertaken will be subject to the usual requirement for the provider to demonstrate that their safeguarding arrangements are fit for purpose.

Background Papers:

[District Councils Network - King's Fund Report](#)

[Kent County Council Cabinet Advisory Committee report 12th July 2016 ItemC2](#)

[Previous report to Housing & Health Advisory Committee 4 October 2016](#)

**Lesley Bowles
Chief Officer for Communities & Business**

APPENDIX A



The Future of Health at the Local Level

The West Kent Integration Board

July 2015

West Kent Districts Health Deal

1. Introduction

District and Borough Councils are in a unique position to help the County Council's Public Health team to deliver the health agenda. We are close enough to our communities to understand how they work and how best to reach and support them. We are also close enough to community groups, other commissioned services and a whole range of agencies to provide a co-ordinated community network to deliver health holistically. We have the health improvement, community development and project management skills necessary to bring about and monitor change and the communication tools to make sure that we reach our communities in appropriate ways. We work in close partnership with the County Council, the Clinical Commissioning Groups and Health & Wellbeing Boards.

District and Borough Councils have a range of statutory duties that are essential to health and wellbeing. Because of their work in areas such as Housing, Planning, Environmental Health, Leisure and Recreation, Community Safety, Licensing and Economic Development, they are able to bring to the table vital components of a local population health offer with measurable return on investment that demonstrates benefits to health. Details of all the current services delivered by this Council, how they address the wider determinants of health and link to key health themes outlined by Public Health are set out in the table at Appendix A.

The West Kent District and Borough Councils are able to go beyond their standard core services and offer enhancements and added value that can really address the wider determinants of health. Some examples of this work that is already taking place and which could be enhanced through the West Kent District Health Deal can be found in Section 3.

We believe that by using our statutory tools and powers together as one strategy, complemented by various health programmes we can start making real in roads into the health issues of the area. We would like to work as a full and equal partner with the County Council and CCGs in a seamless manner - pooling our tools and resources to make a real difference to the health of our residents.

There are many more examples of how the shared priority of County, District and CCG to improve the health and wellbeing of residents can be delivered going forward through a co-ordinated partnership agreement between Kent County Council, Sevenoaks District Council, and Tonbridge & Malling and Tunbridge Wells Borough Councils.

The District/Borough Offer

The recent Kings Fund report looks at the opportunities for District and County Councils, working together holistically, to deliver the public health agenda. It states '**District Councils are in a good position to influence many factors of good health through their key functions**'. It describes a '**radical upgrade in prevention**' which is also detailed within the NHS Five Year Forward View.

As set out in The King's Fund report, in West Kent we understand the opportunity for all of our services to be enhanced by County and District functions working in closer partnership to deliver:

The King's Fund - County and District shared priorities:

- Ensure our actions have a positive effect on public health;
- Ensure we are cost-effective and work together to demonstrate a positive return on investment;
- Take on a more enabling role in improving the health and wellbeing of our communities, and
- Deliver innovative services.

The West Kent Districts and Boroughs already have in place the community and partner infrastructure to influence others and work with communities, the voluntary sector and local GPs to impact positively on areas as identified in ***The King's Fund Report*** and ***Public Health England's 'Healthy People, Healthy Places'*** report:

PHE 'Healthy People, Healthy Places':

- Regulatory - Healthy Food, Alcohol Control and Infection Control;
- Active and Safe Travel;
- Good Jobs and Stay in Work;
- Warmer and Safer Homes;
- Access to Green Space and Leisure;
- Preventative Health and Wellbeing;
- Spatial Environment Planning.

In West Kent we can contribute to the overarching Public Health Outcomes Framework indicators as well as contributing to the wider health determinants and health improvement indicators set by Public Health England. Some of the key indicators that are currently under-performing for Kent compared to the England average that we can assist with relate to:

Public Health Outcome Framework Indicators:

- Emergency Admissions to Hospitals
- Smoking prevalence
- Excess Weight in Adults
- Percentage of physically active and inactive adults
- Percentage of eligible population offered a NHS Health Check
- Injuries due to falls in people aged 65 and over
- First time entrants to the Youth Justice System
- Domestic abuse
- Sickness absence
- Statutory homelessness
- Social isolation percentage of adult carers who have as much social contact as they would like
- Utilisation of outdoor space for exercise/health conditions
- Suicide rates

In West Kent we already have key priorities to *improve the health and wellbeing of residents* and *reduce health inequalities*. We have an excellent track record of working in partnership with KCC and other partners to deliver these priorities as set out in our *Health Inequalities Action Plans*. Our local priorities have also been identified as priorities by local people taking part in community consultations.

West Kent's Key Health Priorities:

- Tackling the rise in obesity;
- Supporting mental wellbeing;
- Ageing well, supporting older people and those with dementia
- Staying safe

The shared priorities set out in this West Kent Health Deal can be delivered through enhancement of our existing core functions. We believe that we can

demonstrate the ***lifestyle, social, environmental and economic*** impact that this will have on the wider health agenda and which will ***improve health longer term***.

2. The Opportunities

There are many examples of District and Borough Councils playing a greater role in delivering health. Examples include not only activities to deliver targeted and universal health improvement services to reduce the risk of people becoming ill, but also to address the ***wider determinants of health to achieve much longer term impact*** and thereby ***reducing the cost to public health and NHS services***.

The West Kent Councils understand the need to invest in prevention now in order to generate considerable savings for health commissioners in the future. We are already committed to working with the County Council to make best use of our core services to improve health. In many cases these could be enhanced to deliver greater impact on health and wellbeing. Some examples of where this could be further enhanced through the District Health Deal include:

- In ***Housing***, Sevenoaks District Council offers a holistic approach to wellbeing through its HERO programme. It encourages retraining for employment and debt reduction to avoid eviction and improve quality of life. At the same time, the project advises on affordable warmth to reduce fuel poverty. Using a ***surgery approach, our advisers provide 1:1 support*** in outreach settings.

There are opportunities to enhance our housing offer using new schemes to provide more appropriate sized housing through down sizing, combating overcrowding and insulated homes and energy efficiency to keep people healthier by providing warm and safe homes. These schemes can be targeted at those in greatest need.

- ***Planning*** can encourage active travel through the provision of green space and cycle lanes, it can also ensure an adequate supply of affordable and appropriate housing and access to green space. Accessing green spaces is increasingly recognised to be as important to mental health as physical health.
- ***Planning and Licensing policy*** can restrict access to unhealthy food outlets and impose restrictions on traffic whilst positively impacting the local economy by creating new local business and job opportunities.
- Whilst there is no statutory duty to provide ***leisure facilities***, the three West Kent councils are mindful of the health benefits of this that not only addresses physical inactivity and reduces sedentary behaviour but provides community facilities which positively impact on mental wellbeing and community

cohesion. Access to leisure services provides ***up to £23 in value for every £1 invested***¹.

- District Councils have no core function to address ***dementia friendly*** principles. However the three West Kent councils support a dementia friendly approach. Initiatives that have already taken place include a stakeholder consultation to find out how services can better serve people affected by dementia and as a direct result training has been provided for over 200 staff and Members as dementia friends. Physical changes to council offices have served to support people, not only with dementia, but also other impairments so that people can more easily access services. We are also instrumental in supporting the new memory cafes and engaging with partners through DF Forums. A number of positive changes have been made within communities to help people to access local services to gain the necessary support to enable people to live well with dementia.

We are only able to do this ***because the investment made by KCC Public Health in our healthy lifestyles work*** has given us the capability to undertake this work.

3. The Evidence - Current Return on Investment

The West Kent District and Borough Councils have a proven track record of delivering externally funded interventions and partnership working. Since 2007, health improvement services have been delivered by the councils, commissioned by KCC Public Health (and previously by West Kent PCT). In addition to delivering the commissioned services, we have utilised the specialist Officer resource to add value and contribute to the health agenda, even though these are not directly requested within the SLA. Some of these include:

- Dementia friendly communities projects
- PPG and GP targeted events for patients
- Health MOT events in libraries
- Co-ordinating the Teenage Pregnancy Local Implementation Group
- Providing health improvement information at town and parish Council events
- Awareness raising articles in Council magazines and promotional materials
- Assisting the Children Centre Steering Group to identify and deliver health priorities
- Working with groups of people with disabilities to deliver inclusive sporting activities.

¹ The Kings Fund - The District Councils Contribution to Public Health, 2015

We have monitored and evaluated the outcomes of these programmes to demonstrate initial and ongoing changes in levels of physical activity, weight loss, positive mental wellbeing and reduction in social isolation. In just one of the district council areas, outcomes include:

- An extra 77,738 minutes of exercise are done each week as a result of Why Weight in one year. ***This equates to over 4 million minutes of additional exercise per year.*** It is estimated that every £1 invested could save £2.55 through treating physical inactivity-related illnesses².
- An extra 697 portions of fruit and 730 portions of vegetables are consumed by participants every two days. That works out at an ***extra 260,427 five-a-day portions per year.***
- Those who attended Why Weight reduced their intake of fried food, high fat dairy and unhealthy snacks by 641 portions every two days. ***This works out as 116,982 fewer portions per year.***
- Our health walks have contributed an extra 6,928 hours of exercise per annum. It is estimated that for ***every £1 invested in Health Walks, £8 of benefits are generated for society***³. KCC funding invests £500 per annum to pay for health walks, so an ***estimated ROI of £8,000 per year over six years.***
- We have used the NICE ‘Return on Investment tool summary for Physical Activity’ to assess the exercise element of our Adult Weight Management Programmes. In one district alone, over a five year period we have worked with over 1.4% of the population. In the short term (first 2 years), compared to the baseline (i.e. no service provision), ***with an investment of approximately £96,000, these programmes generated benefits valued at a total of approximately £1.3m. This investment resulted*** in a gain of 71, 72, 73 and 80 QALYs over 2 years, 5 years, 10 years and lifetime respectively, equating to a ***return of £14.77, £14.91, £15.35 and £17.22 for each pound spent*** on implementing the package, if both healthcare cost savings and the value of health gains are considered.

In housing, the quality of someone’s home has a substantial impact on health; a warm, dry and secure home is associated with better health.⁴ ***Poor housing conditions have a detrimental impact on health, costing the NHS at least £600 million per year.***⁵ Figures calculated by using the Housing Health⁶ and Safety Rating System Costs Calculator⁷ suggest that:

² The Kings Fund (2015)

³ Glasgow Health Walks – SROI Analysis Summary Report (July 2013)

⁴ Houses of Parliament Briefing: Housing and Health (2011)

⁵ Nicol, S. et al., Quantifying the cost of poor housing, BRE press (2010)

- Every £1 spent adapting 100,000 homes where a serious fall is likely to otherwise occur could **save the NHS £69.37 over 10 years**. The estimated ROI for Home Adaptations Programmes yielding a saving of around £7.50 per every £1 invested⁸.
- Every £1 spent improving 100,000 homes where residents are otherwise likely to require treatment due to issues of excess cold could **save the NHS £34.19 over 10 years**.
- Every £1 spent dealing with overcrowding in 100,000 homes that is otherwise likely to lead to health problems could **save the NHS £6.71 over 10 years**.
- National evaluation of handyperson services reported that the benefits **outweigh the costs by around 13 per cent**, with social care costs being the biggest costs avoided. The report described these services as delivering '**a relatively high volume of preventive activity at a relatively low cost**'⁹.

4. Future Return on Investment

We are now in an excellent position to demonstrate and deliver greater return on investments through sustained lifestyle and behaviour changes in the longer term as well as **addressing 'the cause of the cause'** through delivering truly preventative health programmes as part of our key services.

Housing is an important area where small investments can bring significant returns. The quickest wins relating to health and housing can be from **improvements to excess cold, reducing falls and improving housing standards**. There is good evidence of the positive health impact of home improvement programmes demonstrating that **improving the standard of homes pays back quickly**. The West Kent District and Borough Councils deliver a range of home improvement programmes in-house including the **HERO service, home adaptations and winter warmth**, all of which could be enhanced through the West Kent Health Deal.

By working in partnership with CCGs and KCC, we are not only looking directly at lifestyle changes and reducing risk-taking behaviour, but also at the impacts other key factors such as **social, environmental and economic** can have.

Within a partnership agreement we can demonstrate a long term ROI and cost-efficiency saving by having a positive **impact on people's housing, access to**

⁶ Inside Housing (2010)

⁷ Chartered Institute of Environmental Health and Buildings Research Establishment (2008)

⁸ Wales Rapid Response Adaptations Programme (Institute of Public Care 2011)

⁹ Croucher et al 2012, p 3

green space, active travel, financial security, back into work and business support.

5. The West Kent Health Deal

The District and Borough Councils have the ability to deliver targeted and universal services co-ordinated and delivered by the Councils and through a range of key local partners. This will ensure they are only reaching those in greatest need but are *providing a true preventative role in sustaining longer term health improvement* through promotion, campaigns, awareness raising and events.

There are further opportunities to enhance our services to help assess health and wellbeing needs of the individuals to ensure that we are taking a truly holistic approach to the needs of the individual.

Kent Public Health has expressed a need to redesign current commissioned services based on '*drivers for change*'. We understand that these drivers are shared at both county and district level and can positively impact on improved access to services and reducing risk factors of ill health. Some of these shared drivers for change include the need to:

Shared 'Drivers for Change':

- Tackle health inequalities ;
- Address a growing, ageing and diversifying population;
- Prevent escalation of care needs;
- Deliver equal access to services for all.

The West Kent Deal - a Ten Point Enhancement Plan

The following **Ten Point Enhancement Plan** shows some of the ways in which we can enhance our current work to have a great holistic approach to the health agenda and form part of a new Partnership Agreement:

1. **Co-ordination and delivery** of a targeted, **person-centred health improvement model**. Co-ordination and delivery of targeted and universal programmes with local partners to target those in greatest need and to prevent population ill health. This includes triage, motivational interviewing, health checks, physical activity and other interventions that address a range of priority outcomes - delivered to meet local needs.
2. **Policy review** - A review of our key service policies such as housing, planning and licensing to factor in guidance for 'designing in good health'. This could include conditions applied to licensed premises, health impact assessments on planning applications and restrictions on applications that may have a negative impact on health, such as fast food outlets.
3. Using our expert **communications and campaign tools** to get important health messages to people who live and work in West Kent as well as to our partner organisations, voluntary groups and communities who are all essential to a holistic approach to health and well-being.
4. **HERO Advice & Support Service** - Build on the existing service which supports the most vulnerable individuals and families with housing and debt advice, to incorporate health and wellbeing assessments and signposting into the Local Health Hub, as detailed in point 2.
5. **GP partnership** - To continue the excellent work with local GPs and Patient Participation Groups. This relationship has taken many years to build. It is now in place and working well across West Kent. We can deliver referral interventions relating to physical activity, social prescribing, streamlined Phase 4 rehab for cardiac and other long term conditions, weight management programmes and targeted health promotion events for identified patients.
6. An assessment of the **wider determinants of health affecting small areas of our District**, perhaps based on GP surgery catchment areas, putting in place appropriate prevention and related Council services, looking at housing needs, promoting energy efficiency, debt advice, active lifestyles and leisure opportunities, community safety and other initiatives in order to reduce identified health inequalities to ensure that those areas are healthy places.

7. Using our contacts with businesses to ensure that people who work in the District have access to **healthy workplaces** and opportunities to access active lifestyles and health advice and information.
8. Promoting the **use of green spaces, active travel and cycling**. Ensuring best use of green spaces in built up areas and access to the countryside, through area-based mapping.
9. **Making Every Contact Count** - working with and training front line staff and key partners including Fire Service, Kent Police housing associations and voluntary organisations such as CAB, Age UK, Carers First, West Kent Mind and many more. This would include a central referral process to assess all risks, health, social and housing needs to make sure ‘Every Contact Counts’. This would have an impact on reducing hospital admissions by providing preventative measures to support people to remain independent and in their own homes, whilst living and ageing well.
10. Accessing **other sources of external funding** such as Sport England, National Lottery, Awards for All, Sportivate etc. that will complement other preventative health work and target specific areas in West Kent to deliver interventions based on need. There has already been considerable success in attracting other external funding to add value to existing work to deliver community based interventions particularly in deprived or rurally isolated communities.

The West Kent Districts and Boroughs are the best-placed partners to deliver the Ten Point Enhancement Plan. We have:

- Trusted relationships with GPs and PPGs with existing referral pathways in place and working;
- Ability to build on statutory provision to address the wider determinants of health
- Tried and tested health improvement, community development and project management skills in place
- Close partnership working with town & parish Councils, the voluntary and community sector;
- Excellent communications tools aimed at every sector of our community;
- Excellent working relationship with social housing providers, private landlords and land owners;
- Understanding of our communities and their needs from extensive community consultations.

Further details regarding these new opportunities are given in Table 1 below.

Delivering the ‘Ten Point Enhancement Plan’

As part of a West Kent District Health Deal we propose to use all our tools to run alongside various commissioned and universal health improvement services to achieve shared health objectives that are both achievable and measurable. The details of the Ten Point Enhancement Plan are detailed below:

Table 1

SERVICE ENHANCEMENT	DESCRIPTION	CONTRIBUTION TO PUBLIC HEALTH AGENDA
• Enhanced ‘HERO’ Advice and Support Service	Provide health and wellbeing assessments to vulnerable adults and families with signposting to Adult Health Improvement Services. One holistic professional advice service with health and housing.	<ul style="list-style-type: none"> – Good Jobs and Stay in Work – Warmer and Safer Homes – Preventative Health and Wellbeing – Spatial Environment Planning – Supporting older people – Support mental health – Homelessness – Social isolation for carers – Smoking
• Co-ordinated local hub model	Co-ordination and delivery of targeted and universal programmes with local partners to target those in greatest need and to prevent population ill health.	<ul style="list-style-type: none"> – Access to Green Space and Leisure – Preventative Health and Wellbeing – % of NHS Health Checks – Reducing health inequalities – Improving health and wellbeing of residents – % pf physically inactive – Adult excess weight – Injuries due to falls – Support ageing well
• Policy Review and Training	Review of our key service policies such as housing, planning and licensing to factor in guidance for ‘designing in good health’. Training of frontline workers including benefits, licensing, planning, leisure centres in health awareness.	<ul style="list-style-type: none"> – Good Jobs and Stay in Work – Warmer and Safer Homes – Preventative Health and Wellbeing – Spatial Environment Planning – Supporting older people – Support mental health – Homelessness – Social isolation for carers

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SERVICE ENHANCEMENT	DESCRIPTION	CONTRIBUTION TO PUBLIC HEALTH AGENDA
<ul style="list-style-type: none"> • Communications and campaign tools <ul style="list-style-type: none"> – In- Shape Magazine to all households and businesses – Website and social media – Access to parish and partner newsletters 	Targeted health messages to those in greatest need with local partners. To raise awareness and educate residents on reducing risk factors and supporting national health campaigns.	<ul style="list-style-type: none"> – Access to Green Space and Leisure – Preventative Health and Wellbeing – % of NHS Health Checks – Reducing health inequalities – Improving health and wellbeing of residents – % pf physically inactive – Adult excess weight – Injuries due to falls – Support ageing well
<ul style="list-style-type: none"> • GP Partnership 	To deliver referral interventions relating to physical activity, social prescribing, streamlined Phase 4 rehab for cardiac and other long term conditions, weight management programmes and targeted health promotion events.	<ul style="list-style-type: none"> – Access to Green Space and Leisure – Preventative Health and Wellbeing – % of NHS Health Checks – Reducing health inequalities – Improving health and wellbeing of residents – % pf physically inactive – Adult excess weight – Injuries due to falls – Support ageing well
<ul style="list-style-type: none"> • Targeted assessments of health determinants and delivery of risk factor education and awareness programmes 	Based on GP surgery catchment areas, putting in place appropriate prevention and related Council services to reduce identified health inequalities. Targeting pockets of deprivation. Working with GPs, Practice Managers, nurses, PPGs and the voluntary sector.	<ul style="list-style-type: none"> – Preventative Health and Wellbeing – Reducing health inequalities – Improving health and wellbeing of residents – % of physically inactive – Adult excess weight – Injuries due to falls – Support ageing well
<ul style="list-style-type: none"> • Healthy workplaces 	Working with businesses to access healthy workplace initiatives	<ul style="list-style-type: none"> – Active and Safe Travel – Good Jobs and Stay in Work – Warmer and Safer Homes – Access to Green Space and Leisure

SERVICE ENHANCEMENT	DESCRIPTION	CONTRIBUTION TO PUBLIC HEALTH AGENDA
		<ul style="list-style-type: none"> - Spatial Environment Planning - Preventative health and wellbeing - Supporting mental wellbeing - Reducing obesity - % of physically inactive
• Natural Ways to Wellbeing	Promotion of the use of green and open spaces through targeted interventions including walking, cycling and active travel	<ul style="list-style-type: none"> - Active and Safe Travel - Access to Green Space and Leisure - Spatial Environment Planning - Preventative health and wellbeing - Supporting mental wellbeing - Reducing obesity - % pf physically inactive
• Every Contact Counts	Work with GPs, HERO and voluntary sector to assess independent living needs of vulnerable and older people	<ul style="list-style-type: none"> - Preventative Health and Wellbeing - Reducing health inequalities - Improving health and wellbeing of residents - Injuries due to falls - Support ageing well
• Sourcing other External Funding	Accessing other sources of external funding to complement preventative health work. Delivery of targeted interventions based on needs	<ul style="list-style-type: none"> - Preventative Health and Wellbeing - Reducing health inequalities - Improving health and wellbeing of residents - Support ageing well - Access to Green Space and Leisure - Supporting mental wellbeing - Reducing obesity - % of physically inactive

6. Conclusion and Summary

The three West Kent district and borough councils work closely with the County Council, Clinical Commissioning Groups and Health and Wellbeing Boards. We would like to *be a full and equal partner with Kent County Council* and the CCGs in contributing to the preventative health agenda that will keep people to become fitter and healthier whilst remaining independent in their own homes. A West Kent Health Deal delivered through a signed Partnership Agreement would help the health service and Social Care Services *met their current and future budgetary challenges*.

In times when budgets are reducing, there is greater need for budgets to work harder and smarter and in a more co-ordinated way. The West Kent Health Deal would help to deliver long term and sustainable services through a partnership arrangement leading to reduced health inequalities, improving long term health and wellbeing of residents and contributing to financial efficiencies of future health services. Part of the Ten Point Enhancement Plan is to look for additional funding elsewhere to continue and build on the work.

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APPENDIX B

DISTRICT AND BOROUGHS CONTRIBUTION TO HEALTH

2016/17	SDC	T&MBC	TWBC	TOTAL
Voluntary Sector Infrastructure & grants	£130,000	£123,800	£200,000	£453,800
Campaigns, Information and Advice – West Kent	£8,000	£4,000		£12,000
Youth Projects	£18,000	£8,000	£48,000	£74,000
Community Development	£38,000	£15,000	£28,000	£81,000
Housing Assistance	£45,000	£60,000		£105,000
Targeted Sport & Leisure	£50,000	£5,000	£10,000	£65,000
Rapid discharge scheme	£30,000	£30,000	£30,000	£90,000
Active travel				£6,000
Domestic Abuse	£16,000	£12,200	£18,000	£46,200
TOTAL	£335,000	£258,000	£334,000	£933,000
DFGs	£889,000	£917,000	£981,000	£2,787,000
TOTAL ADDING IN DFGs	£1,224,000	£1,175,000	£1,315,000	£4,653,000

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