Report to:	Health and Wellbeing Board	
Date:	22 October 2014	
Report of:	Wendy Meredith Director of Public Health	Report No:
Contact Officer:	Nicki Lomax Consultant in Public Health	Tel No:
Report Title:	Update on implementation of the Staying Well and Ageing Better Programmes	
Non Confidential:	This report does not contain information which warrants its consideration in the absence of the press or members of the public	
Non Connuential.		
D	Γ=.	
Purpose:	The purpose of this report is to inform the Health and Wellbeing Board of: - Progress in implementing the Staying Well targeted prevention and early intervention programme for older people; - Proposed implementation of the Greater Manchester Ageing	
	Better Programme in Bolton.	
Recommendations:	It is recommended that the Health and	Wellbeing Board:
	notes the progress being made to implement these key transformation programmes focused on the health and wellbeing of older people;	
	receives further updates and ev	aluation reports.
Decision:		
Background		
Doc(s):		
,		

1. INTRODUCTION

- 1.1 The purpose of this report is to provide the Health and Wellbeing Board with an update on the progress of two programmes that contribute to the transformation of services for older people in Bolton.
- 1.2 The Staying Well programme will deliver targeted prevention and early intervention to older people at risk of dependency on health and social care services and at risk of hospital admission.
- 1.3 The Ageing Better programme is a Big Lottery funded initiative to develop new community approaches to reducing social isolation amongst older people.

2. STAYING WELL

- 2.1 Approval was given in June 2014 to invest in the Staying Well programme of targeted prevention and early intervention for older people at risk of dependency on health and social care services and at risk of hospital admission.
- 2.2 The Staying Well approach offers an opportunity to 'shift the curve', enabling targeted investment in prevention to stem the further escalation of demand. The Staying Well offer will increase the opportunities for older people to enjoy long healthy lives, feeling safe at home and connected to their community.
- 2.3 The service model has been shaped by evidence, national policy direction, best practice and evaluation of the Bolton Staying Well pilot. The Staying Well offer will be embedded and aligned within the emerging local system of integrated care, ensuring a whole system approach to reducing demand and optimising the health and wellbeing of older people.
- 2.4 The key principles underlying the proposed model are:
 - An asset based approach, promoting maximum independence and selfdetermination of older people;
 - A place based approach to use and development of community assets/resources;
 - Integration within a whole system of care, community and place.
- 2.5 The offer is based on the delivery of a Staying Well intervention comprising the following elements:
 - A person-centred conversation about needs and assets using the holistic Staying Well tool, covering 12 key dimensions of health and wellbeing (see appendix 1):
 - Individual goal orientated action planning to ensure patient/service user activation;
 - Time limited interventions that support and motivate behavioural change to improve health and well-being;
 - Facilitation to helping people to navigate the system and information sources, signposting on with support, checking back on progress and immediate outcomes;
 - Support, information or advice to encourage self-care and self-management.

- 2.6 The intervention will be delivered by 'Health and Wellbeing Co-ordinators' recruited and trained to deliver the holistic Staying Well intervention described above. Co-ordinators will use a range of knowledge and skills to support these steps and encourage a self-help approach. The service will also maximise the opportunities for self-management, peer support and support from local community, voluntary and faith sector groups.
- 2.7 As with the original staying well pilot residents in receipt of other statutory services such as from a long term conditions practitioner and/or social work will be excluded to ensure that there is no duplication.

3 ROLL OUT OF STAYING WELL IN 2014/15

- 3.1 For the roll out in 2014/15 it is proposed that the Staying Well offer is extended through:
 - Proactive Staying Well offer: continuation of existing work with 6 GP practices
 from the pilot phase and extension of this offer to additional GP practices aligned
 with the evolving Integrated Neighbourhood Teams. Using risk stratification tools to
 systematically target older people at risk through practice lists, ensuring an
 integrated approach to targeted prevention;
 - Reactive Staying Well offer accessed through Social services front door: offering an alternative pathway of support and early intervention for older people who self-present or are referred to social services but are not eligible for statutory social care under fair access to care criteria.
 - Community Capacity Building: underpinning the Staying Well offer, delivered through the Staying Well service, it is proposed that there is a specific work stream to stimulate and develop community capacity to support older people's health and wellbeing. This community capacity building work stream is absolutely essential to fully realise the potential of communities, neighbourhoods and their residents to assist in the delivery of prevention and early intervention, and to address the many inequalities in outcomes for older people across the borough.
- 3.2 The social care front door will be a redesign of the social care customer pathway, developing a pre-assessment 'early intervention staying well service' as the front door of Adult Services to enable, signpost, and maximise independence which will prevent, delay and reduce the need for care.
- 3.3 Regardless of access route the proposal is to deliver a consistent, holistic Staying Well intervention through small teams of Health and Wellbeing Co-ordinators located in each of the service settings above.

4 UPDATE ON STAYING WELL IMPLEMENTATION

4.1 A Staying Well Transformation Steering Group has been established to oversee the implementation and evaluation of the Staying Well programme, and ensure clear lines of accountability to the health and social care integration governance structure. Membership and terms of reference have been signed off by the Integration Board. The Transformation Steering Group has developed a

- comprehensive project plan that is reported on weekly to the Integration Delivery Team.
- 4.2 Recruitment of Staying Well programme staff is underway including: appointment of the Community Capacity Lead, Staying Well Supervisors (2 WTE), Staying Well Coordinators (8.5 WTE), a Project Support Officer and posts being established from existing staff.
- 4.3 In addition to Phase 1 delivery in the existing pilot GP practices (3.1, above), it is expected that Phase 2 roll out will begin at the end of December 2014, extending the Staying Well programme to be accessed through the social care front door and through five additional practices aligned with the Integrated Neighbourhood Teams.
- 4.5 A comprehensive evaluation of the pilot Staying Well programme is currently being finalised. This will present detailed analysis of Staying Well activity, measures of impact and cost/benefit analysis. An evaluation framework is being developed to ensure ongoing monitoring, learning and review of the wider Staying Well roll out.

5 AGEING BETTER PROGRAMME

- 5.1 Greater Manchester has been successful in a bid to the Big Lottery Fund (BIG)
 Ageing Better Programme, securing over £10 million for a test and learn approach
 to developing new community approaches to reducing social isolation amongst
 older people.
- 5.2 At an early stage AGMA Chief Executives proposed a GM bid. The collective approach to this ensured that the GM bid was able to gain £10m significantly in excess of the guideline upper limit BIG had identified for the Ageing Better programme of £6m per bid.
- 5.3 In order to proceed with the bid AGMA local authorities were required to appoint a community and voluntary sector organisation who would lead the bid and be financially accountable for any funding received. Greater Manchester Centre for Voluntary Organisations (GMCVO) were appointed to lead the Bid in November 2013.
- 5.4 Bolton contributed to the overall success of the bid including through an Older People's Consultation event in April 2014, to gain older people's views on what the ageing better monies should be spent on.
- 5.5 Three wards have been selected as the focus for the programme implementation in Bolton (Crompton, Halliwell and Tonge with the Haulgh), based on criteria including relative deprivation, ethnic diversity and size of ageing population.

6 IMPLEMENTATION OF AGEING BETTER

6.1 The Greater Manchester Ageing Better partnership, led by GMCVO, will use a bottom up, community-based approach to prevent and tackle social isolation, build stronger communities and establish an evidence base of what works to influence wider strategies and commissioners.

- 6.2 The project will do this by contracting a network of community connectors (CCs), community organisations who will develop an understanding of local need and identify solutions to address social isolation and loneliness. It is expected that eight community connectors will be commissioned to work with older people to focus on three wards in each of the LA areas (ie one community connector organisation in each Local Authority).
- 6.3 The intention is to build on community assets and networks that already exist, and community connector organisations will:
 - Support older volunteers to identify and develop local assets. Asset mapping will highlight strengths, resilience and where investment is needed to transform provision.
 - Co-design and co-produce enhancements to local assets with local older people
 - Improve links between organisations and optimising local resources.
 - Work alongside evaluators to assess the benefits of the enhancements.
 - Work with other CC's to share learning.
- 6.4 Through this investment in community assets the Ageing Better programme aims to ensure that:
 - Older people are less isolated.
 - Older people are actively involved in communities with their views and participation valued more highly.
 - Older people are more engaged in the design and delivery of services.
 - Services that help reduce isolation are better planned, co-ordinated and delivered.
 - Better evidence is available to influence the services that help reduce isolation for older people in the future.

7 Governance and Resources

- 7.1 GMVCO will act as a lead Commissioner and will work with the appointed Local Authority lead and other key stakeholders to develop a commissioning specification.
- 7.2 Organisations in Bolton will have the opportunity to bid for the Ageing Better contract. The successful organisation will act as a Community Connector and will be required to develop a local governance structure led by older people themselves, who will oversee and direct the work of Ageing Better.
- 7.3 The Ageing Better contract for Bolton is expected to bring investment of £675,000 over five years. A further £3.2 million will be made available in year 2 to pump prime scaled interventions across Greater Manchester local authority areas.
- 7.4 A partnership approach will be taken to ensure that strategic links across all sectors including health and social care integration workstreams are developed and maintained. Mechanisms for effective communication will be developed, maximising opportunities for engagement and allowing a fair bidding process.
- 7.5 The programme will be delivered through development and implementation of a five year local delivery plan, with implementation to start in April 2015.

8. **RECOMMENDATIONS**

- 8.1 It is recommended that the Health and Wellbeing Board:
 - 8.1.1 notes the progress being made to implement these key transformation programmes focused on the health and wellbeing of older people;
 - 8.1.2 receives further updates and evaluation reports.

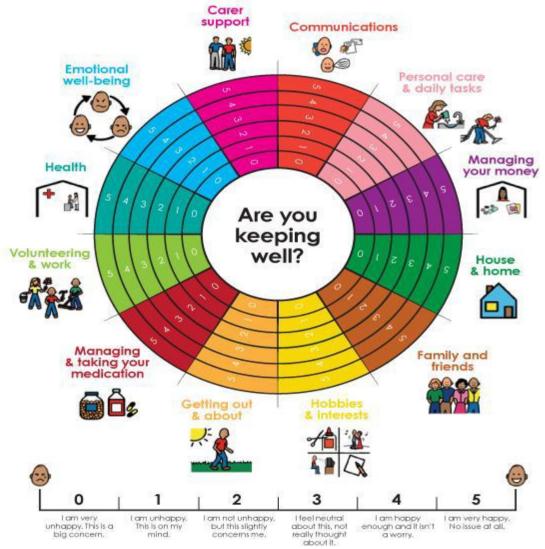






Quality of life wheel

Using the scale at the bottom of this page, tell us how happy or unhappy you are using the key categories from the quality of life wheel. Please rate these from 0-5.



Scoring of 0-2 will need a further detailed conversation to identify appropriate information, advice and support

Produced by Bolton Council - Public Health Department