Better health, better lives

Ambition

We want all of our population to be healthy, well and able to live independently for as long as possible – with the right healthcare or support for each person, available at the right time. Our ambition is to help everyone take more control of their own health and wellbeing, to see more people taking good care of their health and fitness and to see people supporting each other to make positive changes.

Getting and staying healthy can be harder for people living on low income, in poor-quality housing or leading insecure, stressful lives. Our challenge is to ensure everyone is able to enjoy the best health they can and to have a good quality of life whatever age they are and wherever they live.

Progress on our success measures for 2020

District Plan 2020 target	Short name	Latest value	Trajectory to 2020 target
4a) Increase healthy life expectancy	Healthy life expectancy at birth (Female)	61.0	▶
4a) Increase healthy life expectancy	Healthy life expectancy at birth (Male)	61.5	●
4b) Reduce the gap in life expectancy between the most and least deprived areas	Difference in life expectancy at birth between the most and least deprived parts of the District (Females)	7.2 years	▶
4b) Reduce the gap in life expectancy between the most and least deprived areas	Difference in life expectancy at birth between the most and least deprived parts of the District (Males)	9.6 years	▶
4c) Significantly reduce the proportion of children overweight or obese at age 10 to 11	Excess weight in 10-11 year olds	35.66%	▶
4d) Improve mental wellbeing and reduce high anxiety to below the England average	Self-reported wellbeing - people with a high anxiety score	21.56%	▶
4e) Build on success at tackling loneliness and social isolation	Proportion of people who use services who reported that they had as much social contact as they would like	51.3%	▶
4f) Significantly reduce causes of preventable deaths – smoking, being overweight and obesity – and increase physical activity and healthy eating	Percentage of inactive adults	34%	●
4f) Significantly reduce causes of preventable deaths – smoking, being overweight and obesity – and increase physical activity and healthy eating	Smoking prevalence - adults (over 18s)	20%	▶

▶ On track to meet target by 2020
▲ Some concerns/possible delays
● Not expected to be achieved

Two areas are rated as red in terms of progress:

Increase healthy life expectancy (Male): The contributory factors that slow down progress on male healthy life expectancy include the causes of preventable deaths below including higher than national smoking prevalence. Although this has reduced overall it remains stubbornly high (34%) in lower socio-economic groups.

Significantly reduce causes of preventable deaths – smoking, being overweight and obesity – and increase physical activity and healthy eating: Reducing smoking prevalence is a key priority for the District and although smoking prevalence has reduced it remains stubbornly high in lower socio-economic groups (34%) and disadvantaged groups including people with mental health problems and people with long-term conditions. A range of programmes are in place to tackle these inequalities however collective effort is required to prevent the uptake of smoking and drive down smoking prevalence, as well as to reduce rates of overweight and obesity and to increase healthy eating and physical activity.

Good things are happening here

The **Airedale Integrated Care and Support Pioneers Programme** recognises and supports innovative ideas to integrate health and care services. Health and social care services in Airedale, Wharfedale and Craven were selected as one of the national pioneers to integrate services to deliver a 'Right Care' vision.

Right Care' aims to make health and care services work in partnership in order to provide care that is wrapped around patients' need; helping them to feel empowered, active and safe. Integrating services and providing better support at home with earlier treatment in the community will help prevent people needing emergency care in hospital.

The **Bradford Beating Diabetes (BBD) programme** aims to reduce the risk of getting type 2 diabetes and to provide sufficient information and advice so patients understand what being at risk means and about the complications of diabetes. The programme consists of two phases: first to identify patients who from a previous blood test are known to be at risk; the second, to identify all other eligible adults (for example, people over 40 years old, from high risk black and minority ethnic groups and adults with conditions that increase the risk of type 2 diabetes). Over 17,000 people (out of around 42,000 invited) have taken up the invitation to have a repeat blood test to identify high, moderate or low risk of developing diabetes. Those at high risk are referred to a programme to support them make small, achievable changes in their life. More than 1,200 people have accepted a referral. 1,545 patients have been added to the diabetic register. This shows that BBD not only raises awareness, but also identifies people with diabetes at an early stage, thus reducing the risk of associated complications.

The **Bradford Healthy Hearts (BHH) Programme** aims to reduce the risk of heart attack and stroke to address the fact that Bradford has one of the worst death rates from heart disease in England. Through three programmes, clinicians working with the BHH programme, have:

- Used the QRISK2 assessment (a calculator to work out the risk of heart attack and stroke) to identify people with more than a 10% risk of having a stroke. More than 6,000 patients to date have started statin medication to reduce their cholesterol levels.
- Worked to prevent strokes for people with atrial fibrillation (an abnormal heart rhythm that increases the risk of stroke). This programme has assisted almost 1,000 people to start oral anticoagulation (blood thinning) therapy to reduce the risk of stroke
- Started, in February 2016, a programme to improve blood pressure control for 38,000 patients with high blood pressure, around 13,000 of whom are currently above target.

Based on assumption from clinical trials, BHH has potentially prevented or postponed over 100 CVD events by encouraging patients to understand how to reduce their blood pressure and cholesterol levels along with commencing therapies to help them do this. A website has also been developed and patients have reported positively about how they have been able to take responsibility for their

condition and the medication they take. The BHH team has been honoured to win a number of national awards.

Bradford Care Home Vanguard is a new care model which aims to enhance health for residents in care homes, bringing together Bradford CCGs, from health and social care services, care home providers, technology specialists and academics working across Airedale, Bradford, Craven, East Lancashire and Wharfedale. It is one of the first 29 Vanguard areas that have won a share of a £200m transformation fund. Vanguard sites pilot plans to significantly improve patients' experiences of local healthcare by bringing home care, mental health, community nursing, GP services and hospitals together for the first time since 1948. The local scheme will use technology, such as telemedicine, to integrate services and provide immediate access to expert opinion and diagnosis, where appropriate, supporting individual independence and improving the quality of life of residents by focusing on proactive rather than responsive care and delivering more specialist services into the care home.

Our achievements over the last 12 months

The Health and Wellbeing Board is leading on the delivery of the Health and Wellbeing Strategy, the Better Health Better Lives priority of the District Plan and the Sustainability and Transformation Plan for Bradford and Craven.

. Over the last 12 months the Board has:

- Continued to support and direct development of a whole system approach to health, social care and wellbeing; for example supporting further integration between health and social care organisations and processes and directing the health and wellbeing system to develop integrated strategies. The Board is committed to supporting the move towards an accountable care to ensure maximum integration, best value, improvement in experience and as a driver towards improving population health outcomes. This will ensure that previously disparate parts of the system develop a common purpose and shared understanding and work to the same priorities and high level plans. Particular achievements during 2015-16 have been:
- To secure a partnership commitment to a significant expansion of the jointly operated Better Care Fund. The proposal is with NHS England and if agreed will come into operation in 2016-17. This development brings more of the overall budget for Health, social care and wellbeing into a shared fund that is operated jointly between the local authority and the clinical commissioning groups.
- Providing support and direction to the joint Learning Disability Transforming Care Plan which has reported to the Board in late 2015-16 and has now been submitted to NHS England.
- Mandating and shaping the development of a joint strategy for Mental Health for the District, agreeing the governance of the strategy which is now in development and makes its first progress report to the Board in July 2016.
- In 2015-16 Board members have contributed to the development of a Sustainability and Transformation Plan for Bradford and Craven (development continues into 2016-17). This is the plan that shows how the priorities of the Five Year Forward Vision for the local health economy will be delivered. The plan has to demonstrate how three gaps – our health and wellbeing gap, i.e our major health inequalities, our care-quality gap where our levels of care or quality of service are not as good as those in similar areas; and the finance gap that results from a mismatch in demand and supply are tackled. The plan will form part of a West Yorkshire STP.

The challenges facing us over the next 12 months

Health inequalities remain a continuing challenge for the District, particularly those that are related to deprivation where it has proved difficult to make progress in disadvantaged sections of the population, for example on smoking prevalence, excess weight, healthy eating and physical activity.

Funding uncertainties for the health and wellbeing sector remain a perennial challenge, as for the whole public sector, but with a greater than anticipated degree of uncertainty for 2016-17. The West Yorkshire Sustainability and Transformation Plan (of which our local Plan forms one of six chapters) cannot be submitted to NHS England without a plan to close, not just narrow, the funding gap. Current plans across West Yorkshire are not yet sufficient to close the gap and the implications of this for NHS funding allocations are unclear.

Finalising and implementing the local Sustainability and Transformation Plan through the delivery model of an Accountable Care System will be a challenge to the health and wellbeing system. Developing further interventions to close the gaps on health and wellbeing and care-quality, and seeking ways to close the financial gap will be a continuing challenge to 2020 and beyond.

Our focus for the next 12 months

Over the next 12 months the Health and Wellbeing Board will address the priorities outlined in the Better Health Better Lives section of the District Plan. In doing this the Board will continue to focus its efforts on the further development of a system-wide approach to health and wellbeing as this is the main driver for change that will help us to improve health and wellbeing in the long-term, working for and with the local population. This involves building a culture of shared decision-making and joint planning,based on agreed outcomes, and agreement to take significant decisions about resources and plans as a system not as individual organisations. The Board will continue to focus on:

- directing and shaping key decisions in terms of their contribution to a whole system approach.
- influencing the use of resources to make the greatest difference to health and wellbeing
- maintaining a focus on health inequalities

The development and implementation of joint plans and strategies for Learning Disability and Mental Health will continue to receive strategic direction from the Board and the impact of the Better Care Fund will be reported to the Board but as part of its overview of the integration of health and social care.

Over the next 12 months we will streamline the strategies for Health and Wellbeing – updating and bringing together the Joint Health and Wellbeing Strategy with the Five Year Forward View for the Health Economy in Bradford and Airedale into a single high level strategy to guide the developing Sustainability and Transformation Plan. This will help to articulate a single vision for health and wellbeing that builds on and takes forward the Better Health Better Lives priority of the District Plan.

The Board will continue to influence and direct the development of the local Sustainability and Transformation Plan. This will involve the development of an Accountable Care System approach. This approach formalises the sharing of responsibility for delivering good health and wellbeing outcomes across the populationbetween health and wellbeing partners and organisations.

An Accountable Care System brings people, organisations and resources together into a single system to improve the health and wellbeing of the population. It is complex to achieveacross health and social care, and relatively uncharted territory in the UK, but has the potential to deliver much of the ambition for a whole system approach by sharing financial risks and benefits across the system and by incentivising change and rewarding evidence of good outcomes, prevention and early intervention. Current thinking is that there could be two operating models within our accountable care system one serving the population of Bradford and one serving the population of Airedale, Wharfedale and Craven (and potentially beyond). Approaches and systems will be shared where possible and the potential to move to a single approach overall will be kept under review.

The Board will also maintain clear oversight of the development of services and commissioning plans on bigger footprints than just the Bradford district. Whilst mindful that this may be critical to the

overall long term sustainability of services, the Board will need to ensure the needs of the residents are well served by any ‘at scale’ developments.

Continuing with themed sessions at meetings will enable the Board to explore some key issues and priorities in depth. The themes for 2016-17 are being finalised by the Board in late July having been reviewed in light of the developing Sustainability and Transformation Plan.

The Board needs to review its Terms of Reference to reflect and support change over time and to ensure that it is supported by appropriate sub-groups and task groups and has appropriate governance structures reporting into the Board.