

A new model of health and care for Boscombe: update for BRP

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Summary

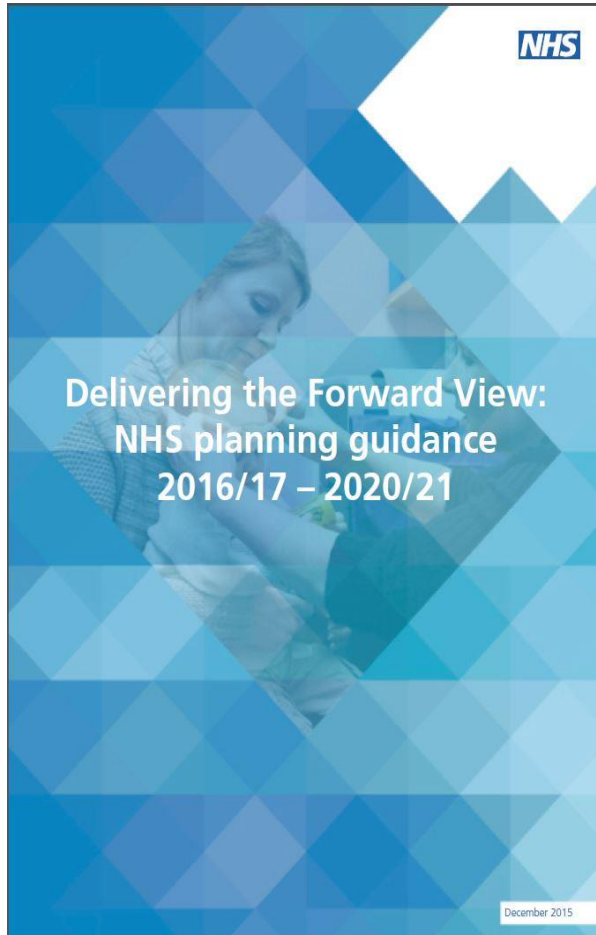
Refreshed Commitments around:

- scaling LiveWell Dorset service
- better provision of NHS Health Checks

Improving way that primary care works:

- Incorporating prevention
- Improving care
- Improving integration
- Involving people

Sustainability and transformation plan



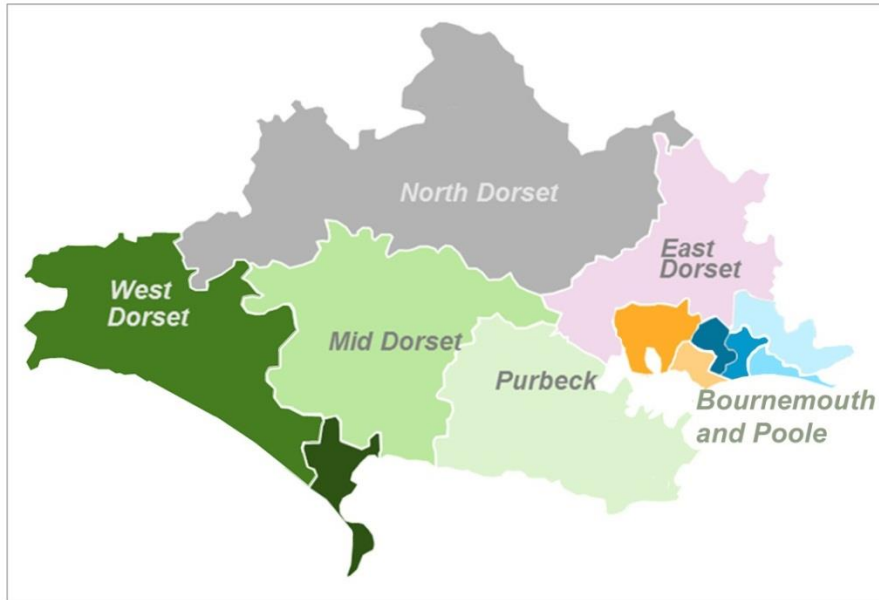
National requirement:

- Accelerate delivery of Five Year Forward View

Focus on:

- How will you close the health and wellbeing gap?
- How will you drive transformation to close the care and quality gap?
- How will you close the finance and efficiency gap?

One Dorset Vision

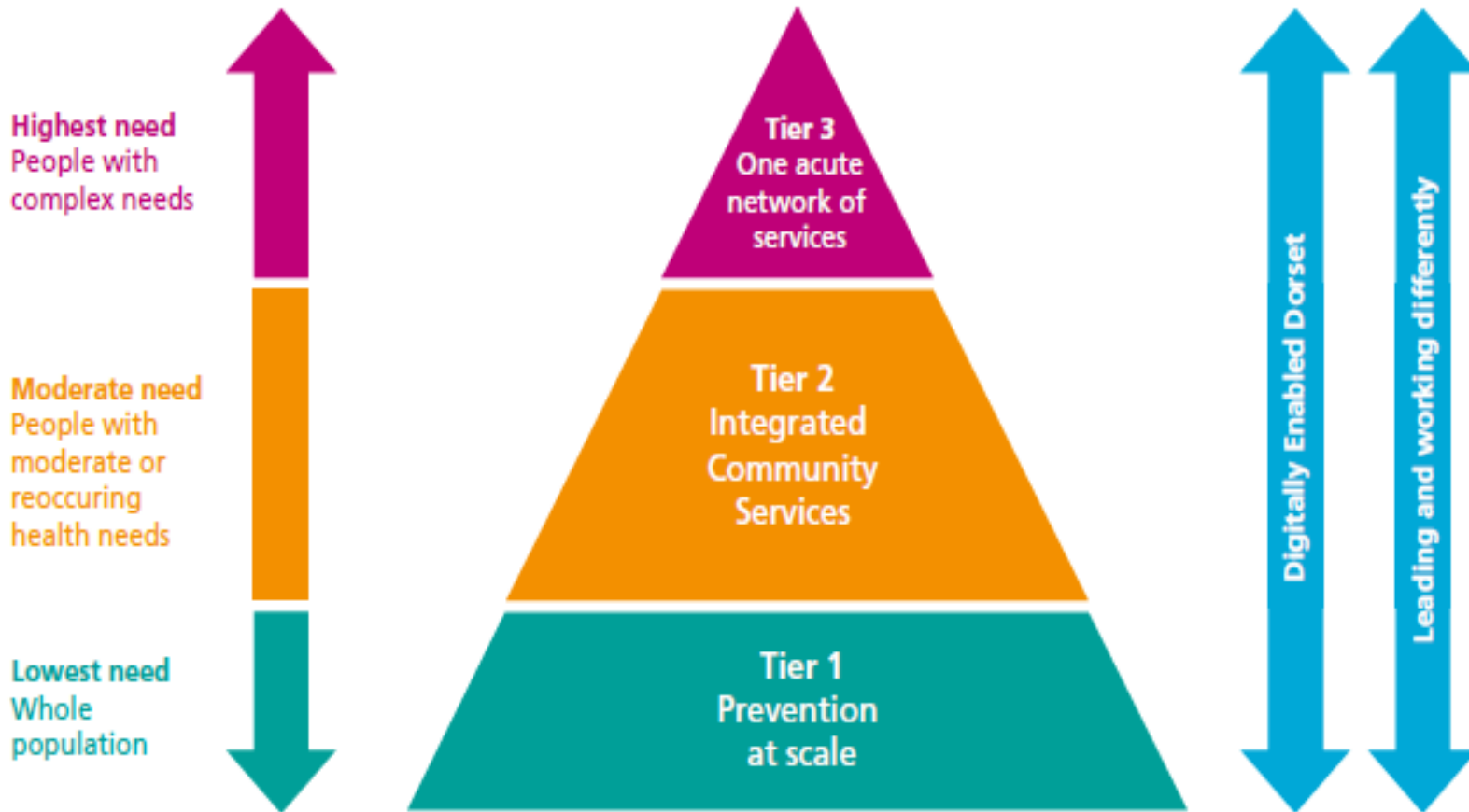


Our vision is to change our system to provide services to meet the needs of local people and deliver better outcomes.

This means:

- People at the centre
- A greater focus on helping people to stay well, including broader factors that impact on health
- Reaching out to where people are, in their homes and communities

From vision to plan



Tier 2 - Integrated community services

Transform primary and community health and care services in Dorset through:

- Community hubs
- Integrated community teams
- Strengthen GP practices
- Integrated community service vanguards
- Acute mental health care pathway review
- Transform urgent and emergency care pathways

What are the challenges?

Inequality

health outcome (life expectancy)

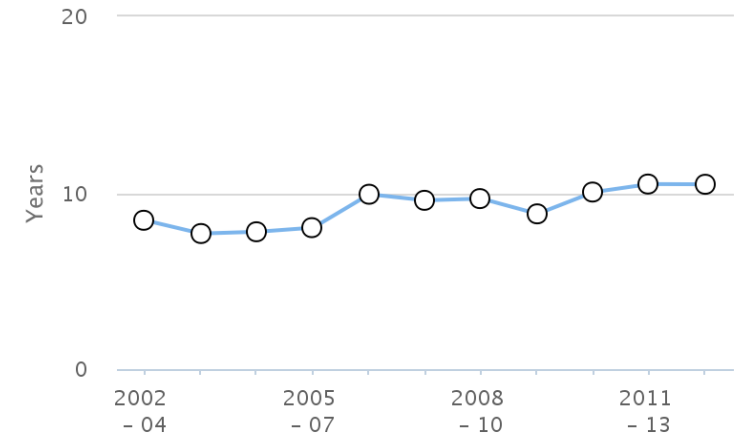
health behaviours (healthy life expectancy)

health and care use (demand or access?)

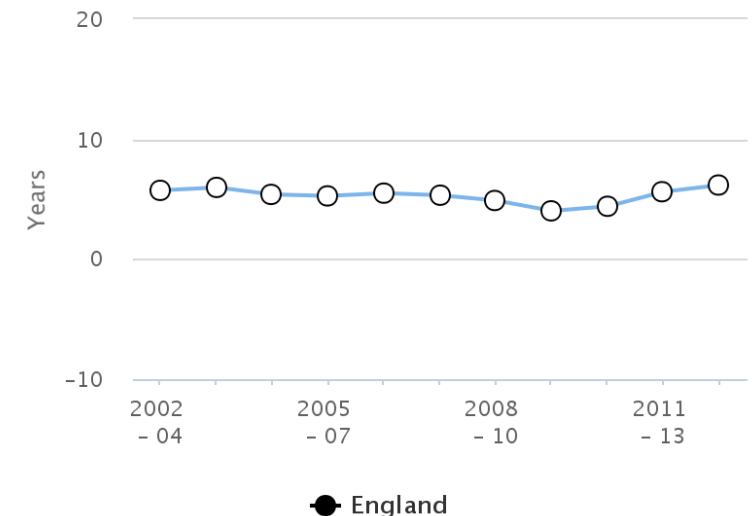
In 2010

Gap in life expectancy (Males)
almost 10 years between
least and most affluent areas

0.2iii – Slope index of inequality in life expectancy at birth within English local authorities, based on local deprivation deciles within each area (Male) – Bournemouth



0.2iii – Slope index of inequality in life expectancy at birth within English local authorities, based on local deprivation deciles within each area (Female) – Bournemouth

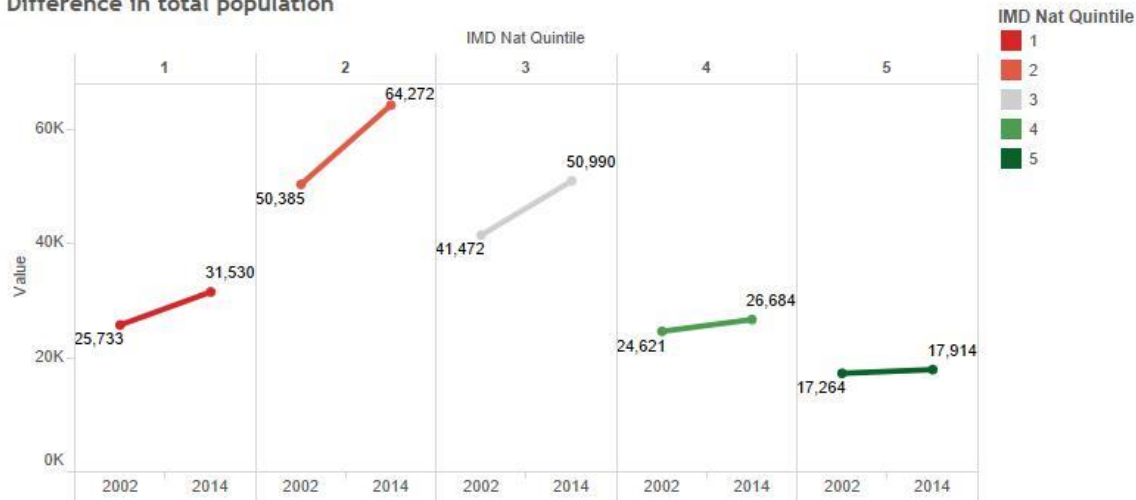


Changes in population by LSOA in Bournemouth between 2002 and 2014.

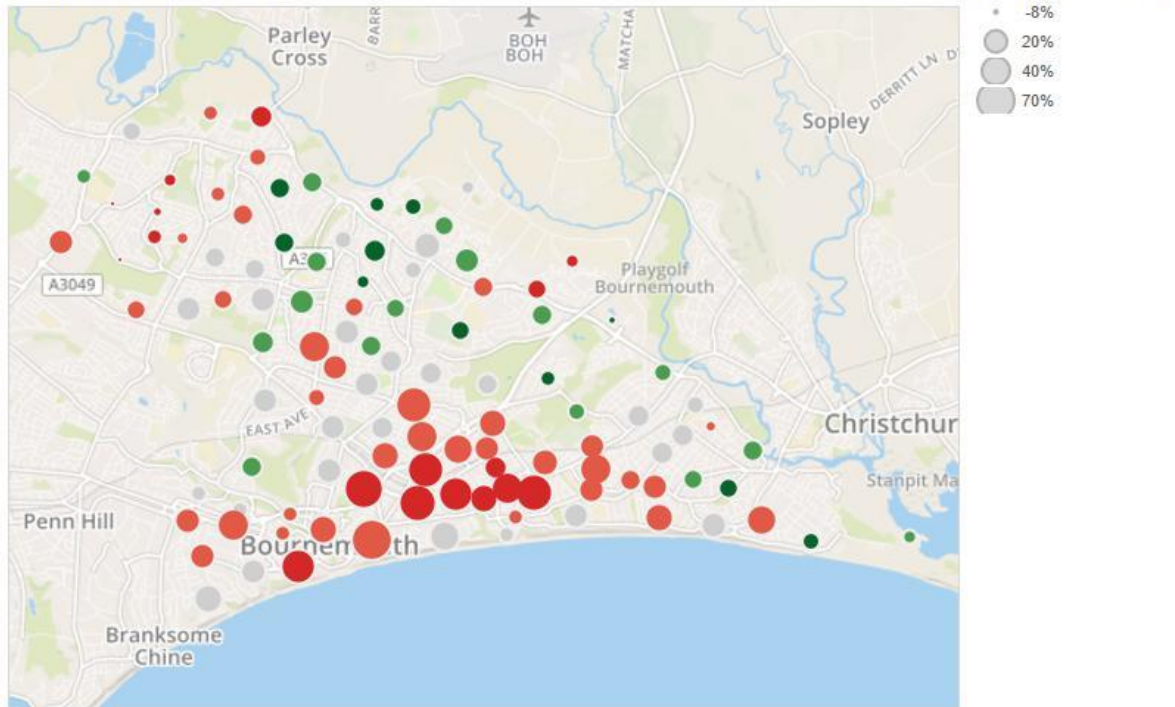
Key points:

- The majority of growth, both absolute and %, happened in the more deprived parts of Bournemouth.

Difference in total population



% difference in population



Population issues to consider:

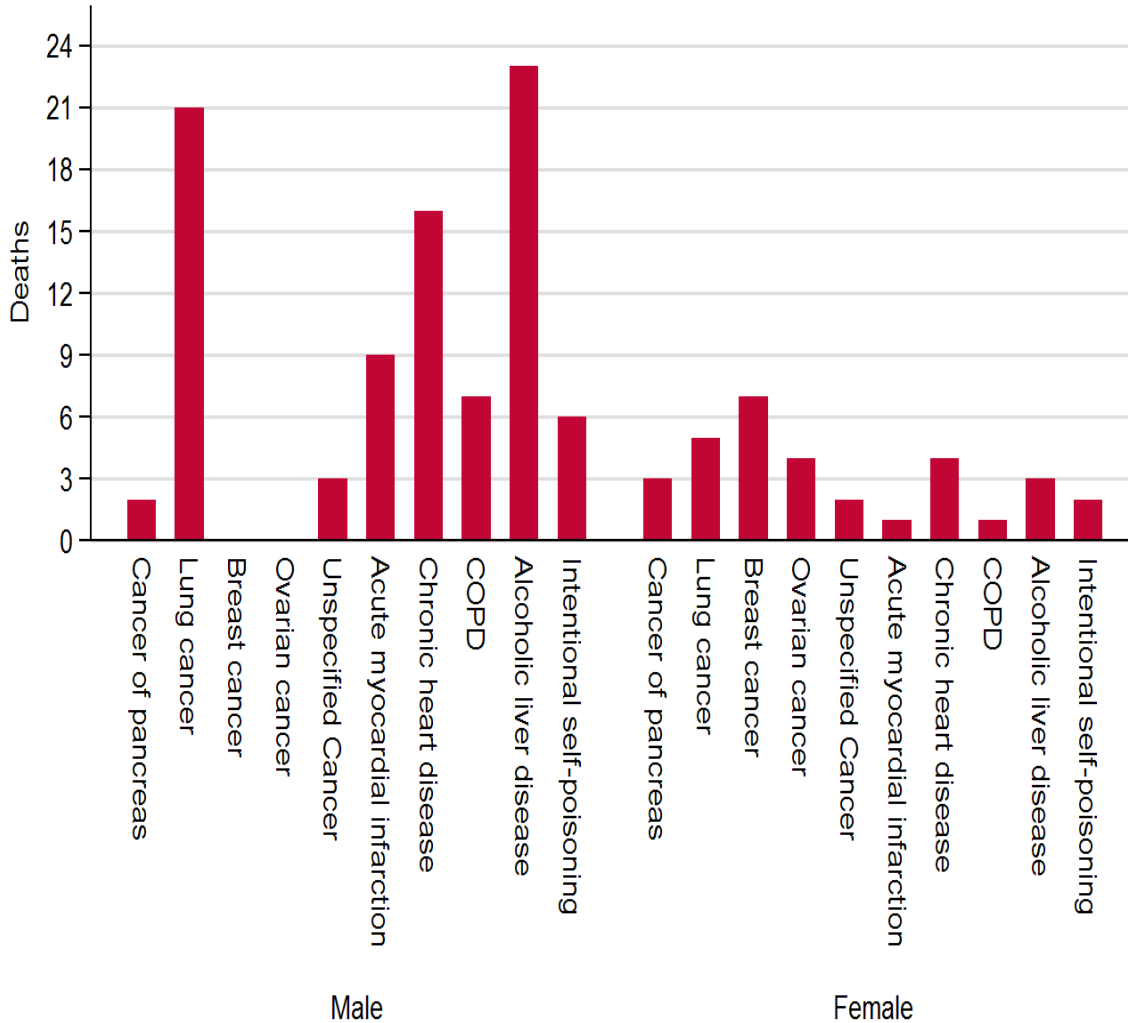
Growth and density –
Boscombe has experienced more growth than other areas

Socially complex issues –
substantial proportion of people have history of complex social issues including poverty, addiction, mental health

Community has a high turn over –
high proportion of private rented / HMO tenure

Among most deprived LSOAs anywhere in SW England

Most common causes of death for under 65s in Boscombe (2010 - 2015)



Alcohol and smoking contributing to many under 65 deaths in men, followed by heart disease

For women pattern is less pronounced but cancers more prominent

Proposed way forward:

Prevention should encompass a three-level approach:

Individual behaviour change (LiveWell Dorset, NHS Health Check)



Organisational – e.g. Build a new model of primary care and community services that is more person-centred



Place-based – longer term, but housing, economy, education strategies of the Council all well placed to deliver over the longer term



Boscombe commitment 2016

Use the local analysis to base commitment actions on –

Challenge questions:

- How do we scale up prevention and reduction of inequalities with a decreasing resource?
- What are the opportunities presented by Clinical Services Review, primary care development, Sustainability and Transformation Plan locally?
- Could we build a different type of primary care organisation in Boscombe?
- How do we get there? Who should be involved? Can we start a social movement around this, working with the Boscombe Forum?

Opportunities and assets

What is there already in place that could potentially help?

1. Mergers taking place between practices – opportunity to provide primary care at scale
2. Integrated community services – move to a population based model of care, working closer with GPs and community
3. CVS voluntary sector navigators pilot – how to scale and ‘grow’ additional support in primary care
4. Boscombe and Springbourne Health Centre – future?
5. Dorset Healthcare site at Shelley Road – re-development potential?
6. Boscombe Neighbourhood Plan – forum for engagement?

- Clinical pharmacists working in community
- Rbch phlebotomy in practices
- B and S centre – bid gone in for larger practice to be housed there
- GPs are working more closely together
- Locality profiles being updated – available from public health
- Public health worker 2.5 days
- Transformation plans – consultation will be on wider strategic issues e.g. linking with DHUFT estates plans
- LiveWell Dorset moving to local model –
- Extending work of Galaxy and healthy homes
- North 51 providing targeted health checks