

Carmarthenshire Foundations 4 Change Panel Day

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Foundations 4 Change

Aim

- To ensure that Hywel Dda University Health Board and the County of Carmarthenshire delivers world class health and the highest quality healthcare for its population by operating as a world class health system
- Delivering better health and well-being for the population of Hywel Dda University Health Board, improving outcomes and reducing health inequalities
- Delivering "The right care, in the right place, at the right time....every time"















Foundations 4 Change

- Foundations 4 Change Board
- Outcome Measures
- Plans on a Page
- Mapped to IMTP
- Mapped to Welsh Government Performance Measures
- Carmarthenshire Single Integrated Plan















Carmarthenshire Outcome Measures

- Health Inequalities
- Life Expectancy
- Immunisations
- Obesity
- Dependent Behaviours
- Frailty
- End of Life Care















- Health inequalities defined as 'systematic differences in health status between different socio-economic groups'
- Indicators Rate difference between most and least deprived
- Age-standardised mortality (all causes), Males 1.5; Females 1.2









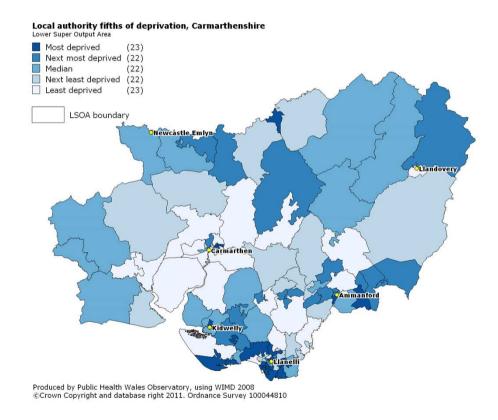






Most deprived areas in Carmarthenshire:

- Pantyffynnon
- Pembrey
- Burry Port
- Glanymor
- Morfa
- Pemberton
- Cwmbach

















- Overall health is improving
- Pattern of improvement varies across communities
- Poor health follows distinct social gradients
- Disparities in terms of education, employment and income















Targets:

- Smoking (respiratory disease and circulatory disease)
- Link to 10 pledges Help 5,000 people to stop smoking or not to start smoking
- Community first clusters focus
- Carmarthenshire Home Standard Impact Assessment
- Smoking Cessation within Primary and Secondary Care















- Communities First have Targeted Action Plan covering physical activity, smoking cessation (early years) and healthy eating
- Make Every Contact Count
- 'Walk and Talk Carmarthenshire'
- Promote Breast Feeding
- Promote Immunisation and Vaccination Programme
- Smoking cessation
- Reduction in alcohol consumption
- GP practices to gain Bronze level Investors in Carers by April 2015
- GP practices to gain Silver level Investors in Carers Award by April 2016
- Education Programme for Patients
- Review patterns of referrals to rapid access TIA clinic
- Carmarthenshire Homes Standard Impact Assessment
- Enhance Care and Repair resource













Life Expectancy

- Life Expectancy is the number of years a person can expect to live in a given population
- Important summary measure of population health as can be used to compare death rates within and between countries over time
- Indicators Life Expectancy, Healthy Life Expectancy















Life Expectancy

Life Expectancy

- Males = 76.7 yrs
- Females = 81.3 yrs

Healthy Life Expectancy

- Males = 62.1 yrs
- Females = 63.2 yrs









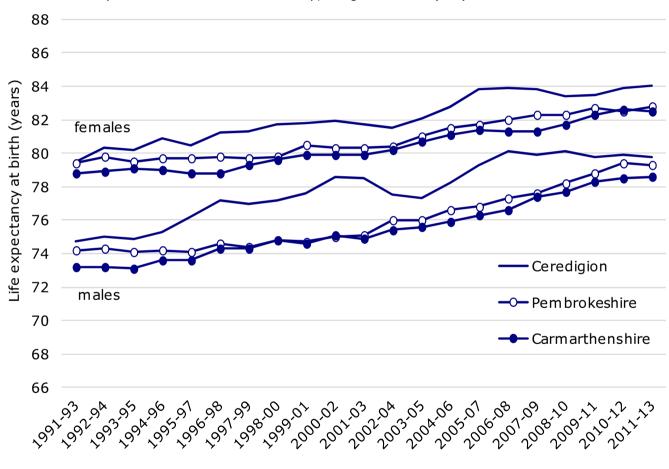






Life expectancy at birth, local authorities within Hywel Dda University Health Board, 1991-2013

Produced by Public Health Wales Observatory, using StatsWales (WG) & ONS



Period of birth















Life Expectancy

- Life expectancy at birth has reached highest level on record for both males and females
- Newborn baby boy can expect to live 77.7 years and a newborn baby girl 81.9 years
- Increase in life expectancy attributed to better survival in infancy and early childhood
- Females continue to live longer than males but gap has been closing















Life Expectancy

Targets:

- Increase healthy life expectancy and reduce the gap between the most and least deprived
- Link to 10 Pledges In 10 years time we will increase life expectancy by 3 years in all the areas with the lowest life expectancy
- Working with GP Practice Data to target our population















While overall health is improving, the pattern of improvement varies across communities due to the wider socio economic determinants of health.

Reducing the gap between the most and least deprived in relation to increasing health and disability life expectancy will therefore be reliant on focused work outlined in the following Outcome Measure submissions:

- Health Inequalities Plan on a Page
- Obesity and Overweight Plan on a Page
- Dependent Behaviour / Smoking Plan on a Page
- Dependent Behaviour / Alcohol Plans on a Page
- Frailty Plan on a Page













Immunisations

Indicators:

- % of children aged 2 who complete immunisation for Measles, Mumps and Rubella MMR)
 92.3%
- % of children aged 5 who complete immunisation for MMR (first and second doses)
- % of children aged 1 who complete 5 in 1 immunisation 96.7%
- % of children aged 5 who complete 4 in 1 immunisation
 91.1%
- % of girls aged 12 to 13 years who complete HPV vaccine 89.1%

Target: 95%







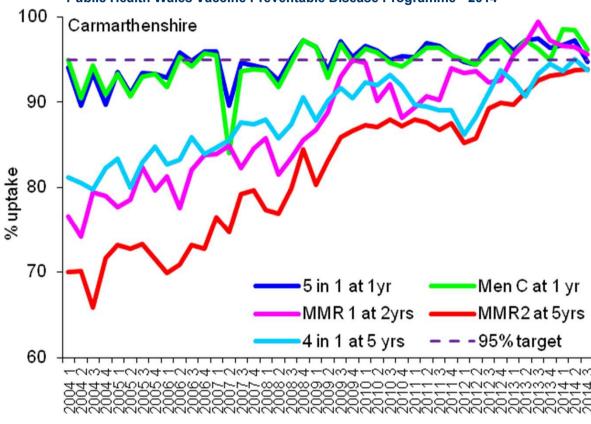






Carmarthenshire LA trends in routine childhood immunisations 2004 - 2014 Quarter 3

Source: Public Health Wales quarterly COVER reports, correct as at December 2014
Public Health Wales Vaccine Preventable Disease Programme - 2014











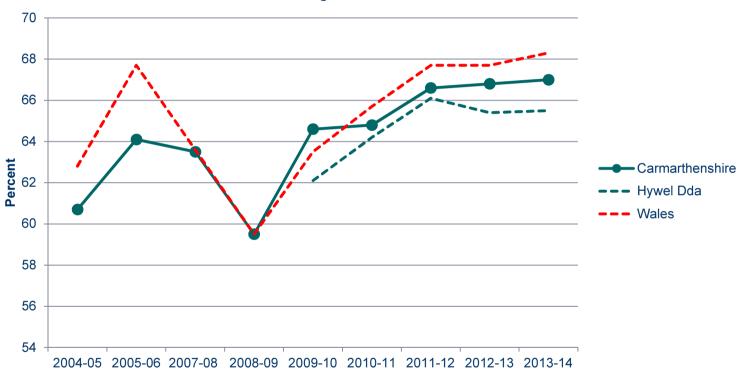






Trends in uptake of influenza immunisation in patients aged 65 years and over

Source: PHW Vaccine Preventable Disease Programme









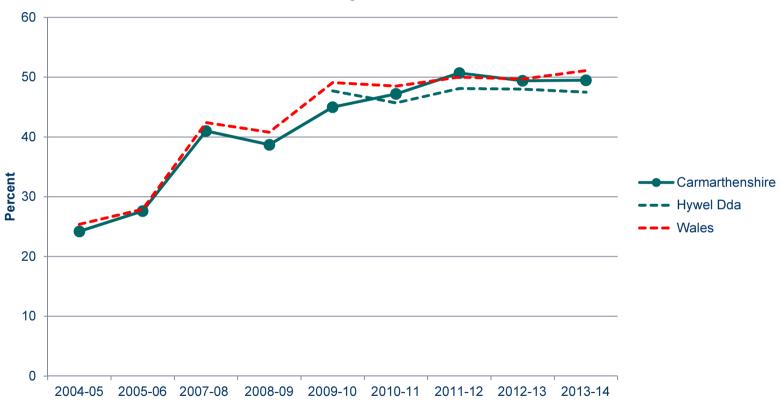








Trends in uptake of influenza immunisation in patients under the age of 65 years in an 'at risk' group Source: PHW Vaccine Preventable Disease Programme

















- Flu champions identified across all community services
- Health and social care organisations to work collaboratively in promoting uptake of flu vaccination
- Continue to promote flu vaccinations and uptake in pharmacies through Targeted Action Plan
- Encourage and support GP practices to hold additional sessions to increase uptake
- Promote uptake through Women and Children's Services
- Negotiate with community based Chronic Conditions Nurses to undertake training and immunise patients on their caseloads during Winter 2015
- Promote staff uptake













Overweight and Obesity

- Percentage of adults overweight or obese increased from 54% to 61%
- Overweight and obesity can add to the burden of chronic conditions and shorten life and healthy life expectancy
- Overweight and obese children likely to become overweight and obese adults, adding to burden of chronic conditions and shortening life and healthy life expectancy
- Increase proportion of adults/children at a healthy body weight (10 pledges)
- Increase proportion of adults/children meeting national guidelines for healthy eating
- Increase in the proportion of adults and children meeting national guidelines for physical activity
- Increase access to healthier choices/options are available
- Develop a motivated and well-trained workforce to support weight management
- Service monitoring and evaluation









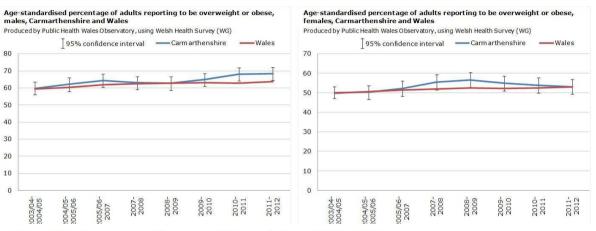




Overweight / obesity by sex: Carmarthenshire, BMI 25+

Overweight or obese (BMI 25+): males

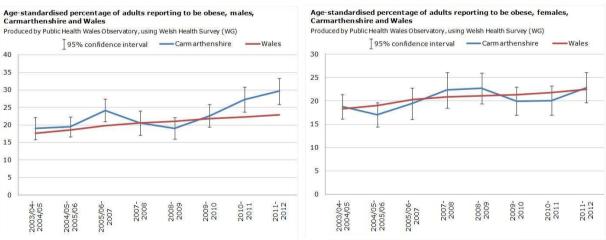
Overweight or obese (BMI 25+): females



Obesity by sex: Carmarthenshire, BMI 30+

Obese (BMI 30+): males

Obese (BMI 30+): females















- Implementation of the All Wales Obesity Pathway
- Carmarthenshire Communities First Plan
- National Exercise Referral Scheme
- iLocal database
- Health Challenge Carmarthenshire
- lechyd Hywel Health
- Third Sector Broker support
- 'Walk and Talk Carmarthenshire'
- 'Nordic Walking'
- 'Walking our Way to Health'
- Healthy Schools Scheme and 5x60 programme















Dependent Behaviour - Alcohol

- Alcohol is a major preventable cause of death and illness with approximately 1,000 deaths being attributable to alcohol per year in Wales.
- Problem use of alcohol can cause serious social, psychological and health problems, affecting work, social and personal relationships.
- Health risks associated with heavy drinking include liver disease, alcohol-related anaemia and nutritional disease, chronic calcifying pancreatitis, heart muscle damage, alcoholic dementia and psychiatric disorders.
- LHB 10 Pledges: Help prevent or stop 7,500 people drinking to excess.







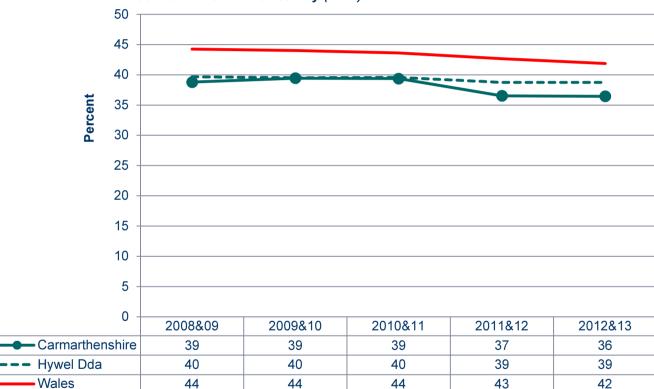






Percent of adults who report drinking above guidlines on at least one day in the past week (Age-standardised)

Source: Welsh Health Survey (2014)











Wales

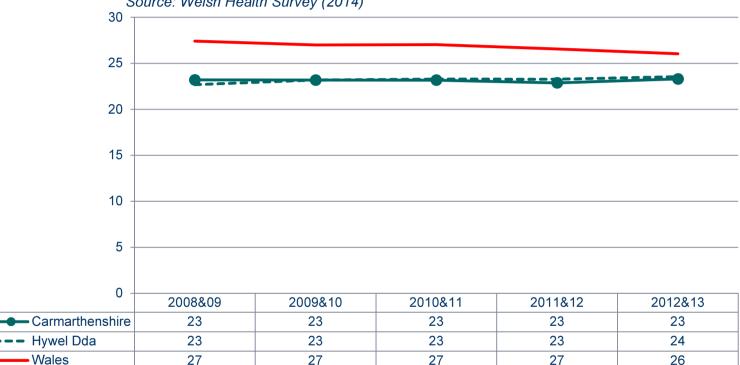






Percent of adults who report binge drinking on at least one day in the past week (Age-standardised)

Source: Welsh Health Survey (2014)









- Wales







- Carmarthenshire Healthy Schools Scheme
- lechyd Da Youth Programme
- Enhance collaborative working between community health and social care services, Welsh Ambulance Services NHS Trust and the 'Front Door' of Hosptial (Emergency Department)
- Enhance opportunities for signposting, diagnosis and treatment through appointment of alcohol liaison nurse
- Pathway for alcohol and drug abuse
- Make Every Contact Count
- Further develop the Street Pastor role













Dependent Behaviour - Smoking

- Tobacco use imposes a significant financial and emotional burden on individuals and society as nearly 50% of all long-term smokers die in their middle age and many smokers will suffer poor health and associated loss of quality of life.
- Significant burden of illness due to smoking has a major cost for the NHS with 20% of all admissions and bed days in Wales attributable to smoking related diseases.
- Smoking has considerable cost to economy through working days lost as a result of ill-health and increases in benefit payment.
- Prevalence current smokers (%)















Adults who report being a current smoker, age-standardised (2003-13) Source: Welsh Health Survey (2014)



0 -	2003/04 & 2004/05	2004/05 & 2005/06	2005/06- 2007	2007&08	2008&09	2009&10	2010&11	2011&12	2012&13
Carmarthenshire	28	24	21	21	24	23	21	20	19
Hywel Dda	27	24	23	22	23	23	23	21	20
Wales	27	26	25	24	24	23	23	23	22













- Continue to promote smoking cessation services and referral pathways across primary care and community services and Make Every Contact Count
- Presentations at GP Cluster Meetings
- Stoptober
- No Smoking Day
- No Smoking Signs for all Carmarthenshire Local Authority playgrounds















SMOKING CESSATION PATHWAY FOR CARMARTHENSHIRE

VERY BRIEF ADVICE

"30 SECONDS TO SAVE A LIFE"

ASK

- Ask and record smoking status at every opportunity.
- · Are you a smoker?
- · Do you still smoke?

ADVISE

- Advise the best way to quit is through a combination of specialist behavioural support and medication.
- · Are they motivated to quit?
- . If the patient is an ex-smoker provide encouragement .

ACT

 Act on patients responses by referring to a smoking cessation service / offering pharmacotherapy (see Pathway).

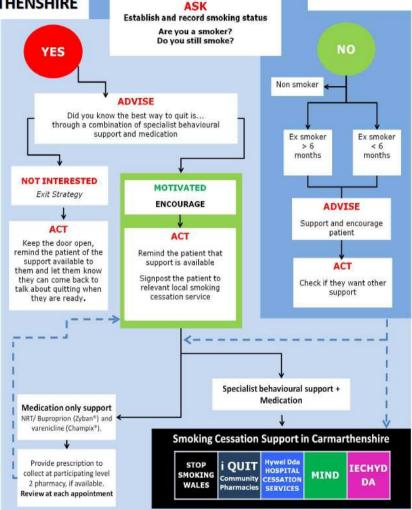
 The smoking status of those who are not ready to quit should be recored and reviewed with the patient at least once per year.

KEY MESSAGES:

- Stopping smoking is the single most important thing you can do to benefit your health.
- Smokers expect to be asked about smoking and it shows clinicians concern about their overall health.
- If clinicians do not mention smoking at every consultation patients are given the impression that their smoking behaviour is not affecting their health and so are less likely to make a quit attempt.
- Smokers are four times more likely to succeed using a smoking cessation service (such as STOP SMOKING WALES, the Community Pharmacy <u>i QUIT</u> scheme or the <u>Hospital Smoking Cessation Service</u>) than if they try to quit alone.
- The benefits of quitting start straight away and it is never too late to stop.





















Frailty

Frailty is an accumulation of deficit over time that results in reduced physiological and functional reserve which predisposes an individual to decreased independence and which could result in a long term loss of independence

- Major challenge to Health and Social Care provision
- 65% of all hospital admissions













- Collaborative working between primary care and community services to sustain and develop care pathways in falls prevention, dementia and end of life according to evidence base
- Enhance current WAST faller pathway
- County wide access to geriatrician led CGA in hospital setting (e.g. SCRAMS) or community
- Atrial Fibrillation clinic/TIA clinic/GPwSI/TOCALS
- Development of education programmes
- Dementia Friendly Communities/Review Clinics













Palliative and End of Life Care

- Ensure appropriate care provided in terms of support to individuals in their place of choice. Provide palliative/end of life care that follows national agreed guidelines (National Council for Palliative Care, the Strategic Palliative Care Board Wales and NICE Guidelines.
- Health Board committed to improving the quality of care provided by all service providers for patients who are approaching the end of their life. A key policy commitment of the Health Board is to bring care closer to home.
- Well planned palliative and end of life care will reduce inappropriate admissions to hospital.













- Implement Together for Health End of Life Care Delivery Plan
- Embed MDT working with GP practices/WAST
- Design and Pilot Palliative and End of Life Care Core Curriculum Training
- Produce Palliative and End of Life Resource File for each GP Practice
- Establish Anticipatory Grief Service.
- Evaluate use of Just in Case Boxes
- Increase percentage of patients on Palliative Care Register
- Increase of prognostic indicator usage
- Workshop to produce Palliative and End of Life Care Strategy for Hywel Dda and Partners













Key Achievements and Challenges 2014/2015

Achievements

- Contribute to IMTP 'Closer to Home' Chapter
- County and Locality Integrated Operational Plans
- Cluster Plans
- Stakeholder Engagement Events in Each Locality
- Introduced New Service Models
- Partnership Engagement in Strategy Development
- lechyd Hywel Health NHS Wales Award Finalist
- Best of Health Awards Winners















Key Achievements and Challenges 2014/2015

Challenges

- Unscheduled Care Activity
- Financial Challenges
- Organisational Change















Key Aspirations

- Service Redesign
- Workforce Redesign
- Enhanced Integration
- Investment in Care Closer to Home
- Community Information System
- Improve Population Health and Well-Being
- Improve Staff Morale
- Delivery of F4C Plans on a Page













Diolch yn fawr Thank you











