

SCRUTINY COMMISSION FOR HEALTH ISSUES	Agenda Item No. 6
10 SEPTEMBER 2014	Public Report

Report of the Executive Director of Adult Social Care, Health and Wellbeing

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CARDIOVASCULAR DISEASE

1. PURPOSE

- 1.1 To inform the Scrutiny Commission that improving outcomes and reducing inequalities associated with cardiovascular disease has been identified as the priority of the Health and Wellbeing Board and to present the reasons for its prioritisation (based on Public Health Outcomes Framework data) to the Commission.
- 1.2 To inform the Commission of the work plan proposed by the Health and Wellbeing Board to take forward work on cardiovascular disease to improve health outcomes and reduce inequalities.

2. RECOMMENDATIONS

- 2.1 The Scrutiny Commission is requested to consider and comment upon the prioritisation of cardiovascular disease and the work plan proposed to address it by the Health and Wellbeing Board.

3. LINKS TO THE SUSTAINABLE COMMUNITY STRATEGY

- 3.1 The cardiovascular disease strategy and work plan will contribute to the Sustainable Community Strategy Priority 1: Creating Opportunities – Tackling Inequalities and, within this priority area, to the outcome: Improving Health - so that everyone can enjoy a life expectancy of the national average or above and benefit from speedier access to high quality health and social care services.
- 3.2 The cardiovascular disease strategy and work plan will directly contribute to improvement in the cardiovascular disease indicators within the Public Health Outcomes Framework.

4. BACKGROUND

- 4.1 Based on review of the Public Health Outcomes Framework indicators and local authority health profiles for Peterborough, the Health and Wellbeing Programme Board identified cardiovascular disease as its top priority in May 2014. The priority was ratified by the Health and Wellbeing Board in July. Peterborough City Council Public Health team were charged with scoping cardiovascular disease and proposing a work plan for adoption by the Health and Wellbeing Programme Board/Health and Wellbeing Board (HWBPB/HWBB).

Work has proceeded with agreement by the HWBPB/HWBB that this will be structured around three themed work streams:

- Prevention and Early Intervention
- Healthcare and Rehabilitation/Reablement
- Continuing Support

- 4.2 There is acknowledgement that the adoption of cardiovascular disease as a priority by the HWBPB/HWBB does not mean that work has not previously been going on, across all partner

organisations (PCC, Peterborough and Cambridgeshire CCG, provider trusts, etc) to improve outcomes and reduce inequalities. However, adoption as a priority by the HWBPB/HWBB provides an opportunity to take a strategic overview of all pathways relating to cardiovascular disease and improve their co-ordination and ensure that each follows current best practice and delivers value for money in order to maximise their impact on health outcomes and the reduction of inequalities.

- 4.3 There is a need to engage with all stakeholders in order to map out the activity and resources currently invested in work programmes and channel it where appropriate towards cardiovascular disease. This will necessitate stakeholder engagement and mapping. This mapping exercise is currently in development.
- 4.4 An opportunity arose in June to bid for funding from the British Heart Foundation to develop their 'House of Care' model locally. This is a person centred model with four key elements:
- i. Engaged, informed individuals and carers
 - ii. Commitment to partnership working
 - iii. Organisational and supporting processes
 - iv. Commissioning (including 'more than medicine' – ie whole pathway from prevention through to re-ablement/re-empowerment)

As a result of this opportunity, initial work on scoping the cardiovascular disease work plan was linked to the completion of the British Heart Foundation bid process. However, it was agreed that the House of Care model be adopted as the vehicle for local cardiovascular disease work regardless of whether or not we are successful in achieving BHF funding. The three work streams discussed at para 4.1 will be incorporated into this model. The bid has been submitted to the BHF and shortlisting is due to be completed by October. Further work will be required to complete the mapping beyond the initial requirements for the BHF bid and this is now being scoped.

5. KEY ISSUES

- 5.1 Improving outcomes from and reducing inequalities in cardiovascular disease is complex and requires a sustained, strategic approach to prevention, health promotion, early intervention, healthcare interventions (in primary and secondary care and in specialised services) and rehabilitation/re-ablement. This will require collaboration between and ownership by all partner organisations and the engagement of local communities (particularly groups who currently experience poorer outcomes). This will be an ongoing programme of work which will extend over the medium to long term.
- 5.2 The Scrutiny Commission is requested to comment on the approach proposed above.

6. IMPLICATIONS

- 6.1 Proposals resulting from the adoption of cardiovascular disease as a priority by the HWBPB/HWBB and from the subsequent work plans may have implications including Financial; Legal; Human Resources; ICT, Environmental, Human Rights, Property, Procurement, LAA targets, Public Health Outcome Framework targets, etc. These will be identified and addressed as they arise.

Tackling cardiovascular disease will require city-wide activity. However, in order to address the inequalities which exist in outcomes from cardiovascular disease, targeted approaches (which may focus on specific geographical areas, e.g. Wards, or specific groups within the population) will also be required.

7. CONSULTATION

- 7.1 Consultation has been undertaken with stakeholders through the HWBPB/HWBB and with other partner organisations, e.g. Greater Peterborough Partnership Health Enquiry Group. Further

consultation on specific issues arising as the strategy develops may be required.

8. NEXT STEPS

- 8.1 Comments received from the Scrutiny Commission will be presented to the HWBPB/HWBB to inform the strategy. The Scrutiny Commission may wish to request further updating reports on this item.

9. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

- 9.1 See appendices

10. APPENDICES

- 10.1
- Appendix 1 - Report to the Health and Wellbeing Board, July 2014
 - Appendix 2 - Report on Cardiovascular Disease indicators from the Public Health Outcomes Framework for the Health and Wellbeing Programme Board, March 2014.
 - Appendix 3 - Key Elements of the House of Care Project, British Heart Foundation.

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