

	Health & Wellbeing Board January 2023
Title	Enhanced Care in Care Homes Programme Update
Report of	Executive Director – Communities, Adults and Health
Wards	All
Status	Public
Urgent	No
Key	Yes
Enclosures	Appendix A – Care homes Programme Report
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Summary

This report provides the Health and Wellbeing Board with an overview of the programme of work underway across the North Central London (NCL) Integrated Care Board (ICB) to deliver the elements set out in the National Enhanced Health in Care Homes Framework (EHCH).

Approximately one in seven people aged 85 or over live permanently in a care home; Evidence suggests that the needs of people living in care homes may not always be effectively identified, assessed and addressed and consequently could result in unrequired, unplanned or avoidable admissions to hospital for a variety of reasons.

NCL ICB is committed to improving the care of care home residents. The ICB has ambitions to identify where training, technology and digital solutions can be used to modernise how care is delivered and facilitate joined up care between organisations.

This report asks the Board to note the local projects progress.

Officers Recommendations

1. That the Health and Wellbeing Board note the workplan and progress to date

2. That the Board agree to receive future reports on action plans and progress on implementation

1. WHY THIS REPORT IS NEEDED

- 1.1. The enhanced health in care homes (EHCH) model is based on a suite of evidence-based interventions, which are designed to be delivered within and around a care home in a coordinated manner in order to make the biggest difference to its residents.
- 1.2. The EHCH model originally published in September 2016 set out a Framework (subsequently updated in March 2020) aimed at addressing the challenge through proactive, personalised care and support for individuals living in care homes or their local community who require support
- 1.3. The EHCH Framework forms part of both the NHS Long Term Plan and the General Practice Contract from April 2020.

2. REASONS FOR RECOMMENDATIONS

- 2.1. This report and the appended presentation provide an overview of the Integrated Care Board Enhanced Health in Care homes programme and how the digital projects align to help achieve aims and commitments outlined in the Barnet Joint Health and Wellbeing Strategy.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1. Not Applicable

4. POST DECISION IMPLEMENTATION

- 4.1. The recommendations of this report will be delivered via the delivery mechanisms (Proactive Ageing Well Steering Group) detailed in the report.

5. IMPLICATIONS OF DECISION

5.1. Corporate Priorities and Performance

- 5.1.1. The programme of work aligns with the overarching aims of the Barnet Joint Health and Wellbeing Strategy 2021 to 2025 and supporting the council's priorities of keeping people independent and maximising technology in social care.

5.2. Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

5.2.1. There are no immediate financial implications for this report.

5.2.2. There are no procurement, staffing, IT, or property implications from this decision.

5.3. Legal and Constitutional References

5.3.1. Under the Council's constitution Responsibility for Functions (Article 7), the Health and Wellbeing Board has the following responsibility within its Terms of Reference:

- *Item 3:* 'To work together to ensure the best fit between available resources to meet the health and social care needs of the population of Barnet (including children), by both improving services for health and social care and helping people to move as close as possible to a state of complete physical, mental, and social well-being. Specific resources to be overseen include money for social care being allocated through the NHS; dedicated public health budgets; the Better Care Fund; and Section 75 partnership agreements between the NHS and the Council.'
- *Item 9:* Specific responsibility for:
 - Overseeing public health
 - Developing further health and social care integration

5.4. Insight

5.4.1. The Programme of work has been informed by:

- Feedback from stakeholder engagements including residents and carers
- The NHS Long Term Plan
- Analysis of local and national data

5.5. Social Value

5.5.1. **N/A**

5.6. Risk Management

5.6.1. No specific risks associated with this decision

5.7. Equalities and Diversity

5.7.1. Decision makers should have due regard to the public sector equality duty in making their decisions. The statutory grounds of the public sector equality duty are found at section 149 of the Equality Act 2010 and are as follows.

5.7.2. A public authority must, in the exercise of its functions, have due regard to the need to:

- a) Eliminate discrimination, harassment, victimisation, and any other conduct that is prohibited by or under this Act.
- b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
- c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

5.8. Corporate Parenting

5.8.1. There are no implications for Corporate Parenting in relation to this report.

5.9. Consultation and Engagement

5.9.1. The Programme of work has been discussed with acute and community stakeholders and service providers as an integral part of strategic planning processes.

5.10. Environmental Impact

5.10.1. There are no direct environmental implications from noting the recommendations.

6. Background papers

- 6.1. The Framework for Enhanced Health in Care Homes
<https://www.england.nhs.uk/wp-content/uploads/2020/03/the-framework-for-enhanced-health-in-care-homes-v2-0.pdf>