



Chester-le-Street District Council

Report to: Executive

Date of Meeting: 7 July 2008

Report from: Director of Development Services

Title of Report: NHS Lifecheck Programme

Agenda Item Number:

1. Purpose and Summary

- 1.1 To present Members draft proposals for the local NHS Lifecheck programme.
- 1.2 It is recommended that Members approve the Lifecheck proposals outlined in this paper and delegate responsibility to the Director of Development Services to:
 - 1. Recruit for the post of Lifecheck Coordinator(s)
 - 2. Oversee the implementation of the Lifecheck Community ICT initiative
 - 3. Negotiate with MIND the delivery of "Lifecheck" support for the "hard to reach".

2. Consultation

- 2.1 Consultation has taken place with the Director of Development Services, the ICT manager, the Community Development manager, the Communities for Health sub group, a number of Health improvement Group members and senior officers from the PCT and Durham County Council. All consultees are in agreement with the proposed approach.

3. Transition Plan and People and Place Priority

- 3.1 The proposed programme supports the Transition plan and People and Place priority. The Lifecheck programme and the work proposed will support particularly the strengthening partnerships, partnerships for the future and Neighbourhoods priorities, as it aims to meet the needs of the

community by working towards reducing health inequalities and improving the health and the wellbeing of the District.

4. Implications

4.1 Financial Implications and Value for Money Statement

There are no financial Implications arising from this report as the Lifecheck grant (£70,000) brings additional resources into the Council and our plan is for the programme to be delivered at no extra cost to the Council. The proposals, where appropriate, include an options appraisal to ensure a cost-effective approach. In addition, depending on how the Lifecheck programme is delivered it may offer opportunities for better targeting/use of current monies allocated in the People and Place programme.

4.2 Local Government Reorganisation Issues

There are no LGR issues affecting the Lifecheck programme except the need for the new authority to take over project management from April 2009.

4.3 Legal

There are no legal implications arising from this report

4.4 Personnel

The draft proposals include a secondment opportunity for a Lifecheck co-ordinator post.

4.5 Other Services

Some council services e.g. Leisure Services, Community development, will have a crucial role to play in advertising the Lifecheck programme as part of their mainstream service, but it is expected that the impact of this involvement on service resources will be negligible. In the case of Selby Cottage one scenario offers the possibility to enhance its current resource base through a half-time Lifecheck coordinator.

4.6 Diversity

The Lifecheck programme will provide opportunities for parents/carers and young people across the District, allowing them to access health information and assess their own health needs.

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4.7 Risk

This funding has been granted specifically to roll out the Lifecheck Programme. The Department of Health will be monitoring expenditure to ensure that the Lifecheck programme has been supported within the District. There is a risk to the uptake on the programme, which depends greatly on partnership working and cooperation of local organizations, parents and young residents. Every effort will be made to engage local service providers and target groups in this process so as to reduce this risk. The Lifecheck co-ordinator post will be another important mitigating factor.

4.8 Crime and Disorder

The Lifecheck Programme equips young people with the information and knowledge to make positive life choices regarding personal health. In this context, its direct impact on crime and disorder will not be great. However, engaging hard to reach young people and raising their self esteem and self confidence reduces the likelihood that they will engage in risk taking behaviour, therefore impacting positively on levels of antisocial behaviour, youth nuisance and crime.

4.9 Data Quality

Every care has been taken in the development of this report to ensure that the information and data used in its preparation and the appendices attached are accurate, timely, consistent and comprehensive. The council's Data Quality Policy has been complied with in producing this report.

4.10 Other Implications

There are no other implications from this report.

5. Background, Position Statement and Option Appraisal

- 5.1 At the Executive meeting of 12th May 2008, Members were informed that the Council, being one of the Spearhead authorities, was offered an additional £70,000 of Communities for Health funds towards preparations for the rollout of the NHS Early Lifecheck programme planned for September 2008.
- 5.2 The NHS Lifecheck is an online resource (www.nhs.uk/lifecheck) that is designed to offer advice and support on key health issues. It is based on a

straightforward questionnaire which, once completed, will provide the individual with information on supporting good health. There are 2 lifechecks due to be rolled out this year, the Early years Lifecheck (for babies 5 -8 months) and Teen Lifecheck (young people 12-15).

- 5.3 The grant is to be used to prepare the ground for the Lifecheck roll out. Suggestions from the Department of Health on types of local activity include supporting people to access internet enabled computers in locations such as children's centres, youth centres and community groups, promotional material and cascable training packages. However all activity must be targeted towards young people and parents and carers of young babies.
- 5.4 The Executive meeting of 12th May 2008 delegated responsibility to the Communities for Health Sub-Group to develop some proposals on taking forward the local preparations for the Lifecheck roll out. This report presents the draft proposals put together by the Sub-Group following consultation with Health Improvement Group professionals.

Draft proposals for the Local Lifecheck Programme

- 5.5 In developing these draft proposals the Sub-group took into account the following two main issues as highlighted in related NHS guidance.
- **Combating Health Inequalities.** The NHS Lifecheck has been developed to combat health inequalities through targeted use in areas of deprivation. In these areas, NHS Lifecheck can be used to encourage people at highest risk of ill health, caused by lifestyle choices, to do a personal Lifecheck and act on the results. Where available, health trainers can use it as a tool to help their clients.
 - **Access to the NHS Lifecheck.** The Lifecheck on-line resource is available on the NHS choices website. Ultimately, it is intended that access will be available in a wide variety of settings, including local surgeries, pharmacies, VCS organisations, leisure and community centres, Children Centres and schools. Additional ideas from the "Communities for Health" Sub-group include access via detached youth work, the local Library Bus, the larger private sector employers, and, naturally, the Council itself.
- 5.6 Taking into account the above, and especially the need to target the more deprived areas and the hard to reach parents/carers and young people,

the Sub-Group decided that our local preparations should concentrate on the following four strands:

1. **A FTE Lifecheck co-ordinator post (on secondment) £30,000.**

The group felt that a co-ordinator post is necessary to ensure: a fast-track preparation for and introduction of the Lifecheck Roll Out, on-going commitment from various agencies/service providers in advertising/using the Lifecheck programme and some level of monitoring/evaluation of “what happens” after parents and young people have carried out the on-line self-assessment (e.g. Do they follow their Lifecheck action plan? Do they enter some other NHS pathway?). The co-ordinator post will also organise/support the work outlined in the other three (3) strands outlined below i.e. Community ICT, marketing material/activities and support for the “hard to reach”.

Options for the Lifecheck Co-ordinator post.

A. Consultants could be commissioned to undertake the Lifecheck work. However, we believe that this would not be an effective use of resources since a co-ordinator post will be much cheaper and will guarantee activity on the ground for at least a year.

B. Another option would be to sub-contract Lifecheck coordination to another public agency or a VCS organisation. However, with the Lifecheck roll-out starting in September, there is a need to move quickly and avoid time-consuming tendering exercises. Equally, the post being sub-contracted would add to management time and potentially delay implementation activities and problem-solving.

C. Offering a secondment with the post being based within the Council and managed by the Community Development and Health Worker. Within the context of Lifecheck and the aforementioned timescales, this is our preferred way forward and could be delivered two ways, either through a full time secondment position or two half-time secondees (still to be managed as above). The former will ensure more streamlined management, flexibility of work methodology and will be more attractive in recruitment terms. The latter will support a more specialist approach since we could deploy the two half-time posts to the two main (but different) target groups. For example, one half-time secondee could be placed at Selby cottage and work with other children centres, parents/carers groups, etc, whilst the other secondee based within the Community Development team could concentrate on working with schools and youth groups to target the 12-15 yrs old. Our preferred option is to go for two half-time secondees and if recruitment proves difficult to offer a full time post.

2. **Community ICT (£15,000).** The group felt that the Lifecheck programme presented a fantastic opportunity to “wire-up” some community venues and offer people increased access both to the Lifecheck programme and a wealth of other resource. A short mapping exercise needs to be carried out by our ICT department using already available information and local contacts. Once the current situation is established with regards to community ICT needs and priorities a Lifecheck roll Out ICT plan will be prepared. Due to project timescales, the plan will undergo informal consultation with Executive Members. Links with the People and Place programme will also be established and the potential for joint Council and Lifecheck funding. Community “wiring-up” and ICT training at community level offer a fantastic opportunity for a “legacy” output for the District Council in its last year.

Options for Community ICT

The Community ICT strand will be delivered by the Council’s ICT team, with support from DurhamNet and will involve re-cycling the Council’s old stock of computers. In this context, there’s no other potentially more cost-effective option to deliver this. The feasibility of this approach has been discussed with the ICT manager and is supported in principle. The sum of £15,000 will be used to purchase connectivity equipment.

3. **Promotional material/activities (£10,000).** Part of the Co-ordinator role will be to develop some local promotion material and activity. Initial ideas include leaflets, posters, young people events, special sessions with parents/carers, etc. Once the Lifecheck co-ordinator (s) is/are in post he/she will work with the Sub-group and other partners to develop a draft list of promotional activities for consideration. The People and Place brand will, naturally, feature strongly in any such activity.

Options for promotional material/activities

This strand will be delivered internally through the coordinators and the Council’s communications/graphic design officers, whilst the funds allocated will cover the cost of materials. Any other option such as sub-contracting the work would prove less cost effective.

4. **Intensive support for the “hard to reach groups” (£15,000).** Given the main target groups for the Lifecheck roll out, the Group felt that some intensive support/guidance might be needed for the harder to reach group. A certain degree of support can be offered through existing mechanisms e.g. health trainers, community nurses, Sure Start officers, community counselors, etc. In addition, it will be the co-ordinator’s role to link up with all such professionals to advertise the Lifecheck programme and negotiate

its use as part of officers' mainstream work. However, we believe that due to the nature of Lifecheck and the timescales involved, some additional specialist support would be beneficial for those "harder to reach" parents/carers or young people 12-15.

Options for supporting "hard to reach groups"

A. One option would be to keep the funds aside and pay for specialist support for the "hard to reach" as and when required. This would give us the flexibility to use a variety of VCS settings and specialisms, depending on an individual's needs. On the other hand, this could be administration intensive and it could also end up a complicated mechanism requiring procedures/criteria as to the type of specialist service, providers lists, the level of costs, the time period for support and so on.

B. Sub-contracting this work to a VCS agency would be another option. However, as with the coordinator's post, timescales are tight and tendering procedures will add to time pressures and will be an extra burden to our currently stretched staff resources.

C. Building on existing successful support mechanisms. Under this option the funds will be used to enhance the Council's existing arrangements with MIND. It is well established that mental health issues are a local priority. MIND have recently delivered some excellent work through Communities for Health funding, work which next year will be reduced by 50% due to lack of funding. The Lifecheck roll-out funds could be used to enhance next year's work by offering specialist support to parents/carers of babies 5-8 months and to young people 12-15. Referrals would be made both through the two Lifecheck coordinators and traditional channels. However, MIND will also be expected to access their target groups through work at community level. This is our preferred option since it builds on an existing excellent service, it supports priority groups and allows for a Lifecheck fast-track. However, if such an arrangement is not possible then Option B would be pursued

6. Recommendations

6.1 It is recommended that Members approve the Lifecheck proposals outlined in this paper and delegate responsibility to the Director of Development Services to:

4. Recruit for the post of Lifecheck Coordinator(s)
5. Oversee the implementation of the Lifecheck Community ICT initiative
6. Negotiate with MIND the delivery of "Lifecheck" support for the "hard to reach".

7. Background Papers/ Documents referred to

7.1 Choosing Health: Making healthy choices easier, Public Health White Paper, Department of Health, 2004

7.2 www.nhs.uk/lifecheck

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