

**Title:** Highlight Report – shifting the focus to prevention and early intervention  
**Wards Affected:** All  
**To:** Health and Wellbeing Board      **On:** 14 March 2019  
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## 1. What has been achieved in the past six months?

- 1.1 A major part of the prevention programme has been taken forward at STP level Devonwide. The Torbay Director of Public Health is the SRO for this work. Progress continues to be made in the key priority areas, across the whole of Devon:
- Making Every Contact Count – employment of training post and significant expansion of training within the wider workforce;
  - Alcohol prevention - implementing alcohol screening and brief intervention in provider settings;
  - Diabetes prevention - implementing the National Diabetes Prevention Programme which provides evidence based interventions to people at high risk of diabetes to prevention progression;
  - Community infection prevention and control – development of a new countywide hub and spoke service incorporating community and primary care. This will prevent and tackle infections and help to address anti-microbial resistance;
  - Falls prevention – significant expansion of evidence based strength and balance training;
  - Emotional health and wellbeing – significant expansion in training and submission of national funding bids to help prevent self-harm and suicide;
  - Physical activity – development and expansion of physical activity initiatives to support all areas of primary and secondary prevention, in partnership with Active Devon.
- 1.2 Outline prevention plans for 2019/20 were agreed by the Devon STP Programme Delivery Executive Group (PDEG) in February 2019. An initial STP wide funding topslice was also agreed for primary and secondary prevention 2019/20 onwards. This should help to strengthen the focus on prevention through the STP and galvanise prevention at scale.

1.3 The NHS Long Term Plan was published in January 2019. The plan has a major focus on population health, prevention and inequalities. This supports the direction of current programmes and also gives impetus to the speed of delivery within the new Integrated Care Systems.

## **2. What are the blockages?**

2.1 Specific constraints on progress vary by programme, but the main limitation on the speed of implementation is management capacity and the significant amount of strategic and structural change occurring simultaneously within the system. These challenges are addressed through building project resource into business cases, and establishing clear governance routes to ensure all parts of the system are engaged, signed up and contributing to relevant programmes.

## **3. What is the planned activity for the next six months?**

3.1 Key areas of activity over the next six months are:

- Maintain pace and momentum on all of the areas highlighted above;
- Implement new agreed priorities around cardiovascular disease prevention;
- Support and expand social prescribing capability across the system;
- Roll out of the integrated 'One Devon Dataset' to identify people with frailty or other risk factors, enabling referral for early intervention, and modelling and evaluation of the impact of interventions;
- Develop robust business cases where new opportunities for prevention at scale are identified within the system.

3.2 An additional important activity is to embed prevention and early intervention effectively within the new structures at system, place and neighbourhood level across Devon, Plymouth and Torbay.

3.3 Partners are currently engaged in firming plans for the additional investment in prevention across the Devon STP system in 2019/20:

- Part 1 – existing areas:
  - Making every contact count
  - Alcohol, smoking & tobacco control, and the wider Lifestyles offer
  - National Diabetes Prevention Programme
  - Community infection prevention and control
  - Falls prevention
  - Social Prescribing
  - Oral Health
  - Mental Health, suicide prevention, and children & young people's mental wellbeing
  - Cardiovascular disease prevention.
- Part 2: new areas. These will be larger scale projects with a potentially substantial impact on prevention, meeting the following criteria:
  - Based on good evidence and able to deliver a return on investment to the system

- Consistent with STP priorities
- Supporting reduction in inequalities
- Able to be delivered at pace and scale
- Already in place within the system with evidence of local benefit
- Crossing all settings of care, including voluntary sector.

These will be submitted by 20 March, for inclusion in system plans for 2019/20.