



Fuel poverty, seasonal health and the new NHS

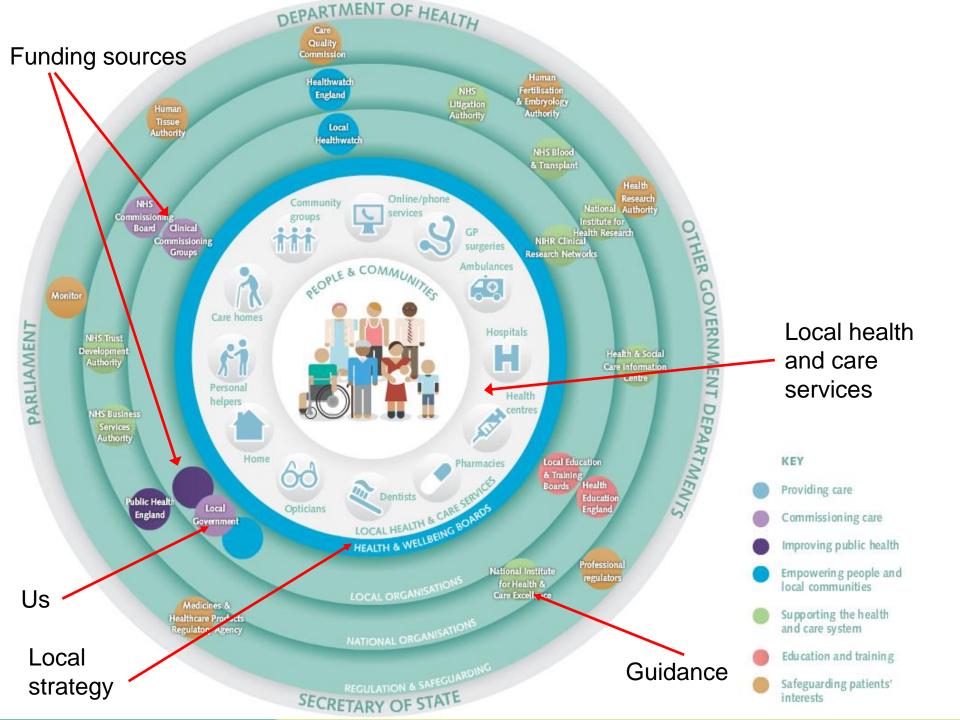
5 July 2013

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Background

- Largest shake-up in the NHS since its foundation
- Return of public health to local government after forty years' absence
- GPs responsible for £65 billion of NHS money from April
- Establishment of local Health & Wellbeing Boards
- Creation of Joint Health & Wellbeing Strategies
- Opportunities to engage with new structures





Health & Wellbeing Boards

- Forums "where key leaders from the health and care system work together to improve the health and wellbeing of their local population and reduce health inequalities"
- Each top tier and unitary authority has one
- HWBs have strategic influence over commissioning decisions across health, public health and social care
- Bring CCGs and councils to develop a shared understanding of health and wellbeing needs of the community.
- Undertake the Joint Strategic Needs Assessment (JSNA) and develop joint health & wellbeing strategies, including recommendations for joint commissioning and integrating services across health and care.



Clinical Commissioning Groups

- Replaced Primary Care Trusts
- Move to clinician-led commissioning
- Responsible for buying most health and social care services for their local populations
- All GP practices have to belong to a CCG.
- One or more CCGs in each top tier/unitary area
- Must involve HWBs in their commissioning plans
- Have their own strategies





NICE

- National Institute for Health and Care Excellence
- Produces guidance on a range of health topics.
- Taken very seriously across the world
- From this month working on guidance on excess winter deaths and illness reduction, to be published in January 2015
- Guidance will be of massive benefit
- Local authorities are represented on the Advisory Committee





Public Health Outcomes Framework

- Sets out the desired outcomes for public health and how these will be measured. It concentrates on increased healthy life expectancy, and reduced differences in life expectancy and healthy life expectancy between communities
- Fuel poverty (wider determinants domain) and excess winter deaths (reducing premature mortality domain) are included in the PHOF
- Allows local authority areas to be compared on a number of outcomes
- Lots of other outcomes related to fuel poverty e.g. respiratory health, hip fractures





Why is this relevant to us?

- Including fuel poverty and seasonal health in your local Health & Wellbeing Strategy would be significant
- Opportunities for greater alignment between fuel poverty and winter deaths agendas
- CCGs and Public Health are sources of funding
- Health sector engagement has always been challenging



Challenges

- Lots of scepticism over strength of evidence
- Lack of evidence on admissions' impact
- CCGs may see it purely as a public health responsibility
- Still lots of feet-finding in new structures
- Predominance of lifestyle factors over wider determinants in JHWSs
- Public health at upper-tier, housing and energy at lower-tier
- Lower-tier authorities may not always be well-represented on HWBs



Opportunities

- Flux is a time of opportunity
- Inclusion of fuel poverty and excess winter deaths in JHWSs and JSNAs
- Align with JHWS strategies e.g. long term conditions, early years, mental health, early interventions
- Align fuel poverty to CCG strategies e.g. primary care, close to home.
 Talk their language, not ours
- Make the most of links developed through Warm Homes, Healthy People Programme
- Bid for money!



What else is being done?

- Conference on 16th July
- National Right to Fuel Campaign and NEA working on health economics assessments
- FoE/Energy Bill Revolution engaging with national organisations on guidance
- End Fuel Poverty Coalition, Age UK, CAN and CIEH working to influence national agenda



Seasonal Health Interventions Network

- Running in Islington (and Hackney)
- 3,650 Islington referrals since December 2010
- Package of 27 interventions
- Part-funded by Public Health in development period
- One member of staff funded through NHS Reablement money
- Two years of DoH funding through WHHPF
- National and European awards





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