

**Report to:** Adult Social Care and Community Safety Scrutiny Committee

**Date of meeting:** 16 November 2017

**By:** Director of Adult Social Care and Health

**Title:** Prevention

**Purpose:** To prompt an exploratory discussion about the issues related to preventative services.

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## **RECOMMENDATIONS:**

**The Scrutiny Committee is recommended to:**

- (1) discuss the issues and questions raised in the report; and**
  - (2) identify any areas for further scrutiny.**
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### **1. Background**

1.1 Prevention can be broadly understood in the following ways:

- Services and support that enhance an individual's or communities' health and well-being and therefore reduces the likelihood of them becoming unwell or needing help from others (this can include initiatives to address obesity, social isolation or promote exercise and healthy living)
- Targeted services and support that reduces the need for more acute types of help (this can include housing related support, community wellbeing hubs or initiatives to support parents)

1.2 Key environmental factors such as educational attainment, employment and housing also impact significantly on health and wellbeing with levels of deprivation affecting demand for health and social care support.

1.3 In the context of integrated working with the NHS investment in healthy living, proactive primary and community care and crisis response will also prevent or reduce demand for more costly hospital services. Similarly re-ablement services will help prevent or reduce an individual's likelihood of becoming unwell again or needing ongoing support from statutory agencies.

### **2. Key issues**

2.1 Financial challenges across the NHS and local government means that resources are focused on meeting immediate need and not on prevention – for East Sussex County Council this will mean prioritising safeguarding, assessment and care management and funding personal care for those with eligible need, which is set nationally at critical and substantial.

2.2 The Public Health Grant is ring-fenced for 2018/19 but the position moving forward is unclear.

2.3 Investments in prevention can take a long time to take effect – for example reducing obesity for children will have an impact over a twenty year plus timeframe.

2.4 Providing evidence, and therefore justifying, investment in preventative services is not always easy to achieve. There is evidence that social isolation can impact on mental health and well-being but this does not necessarily equate to investment in these areas directly reducing demand for statutory services.

### **3. Conclusion and reasons for recommendations**

3.1 The committee is invited to discuss the issues raised above and identify any areas for further scrutiny.

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Local Member: All