

**Report to:** People Scrutiny Committee  
**Date of meeting:** 7 March 2019  
**By:** Director of Adult Social Care and Health  
**Title:** Briefing on Prevention  
**Purpose:** To discuss issues related to prevention

---

## **RECOMMENDATION:**

**The Scrutiny Committee is recommended to discuss the issues raised in the briefing.**

---

### **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 statutory support. This can include housing related support, community wellbeing hubs or initiatives to support parents.

1.2 The NHS has recently published its long term plan and this places a strong emphasis on prevention and tackling health inequalities. A summary of the plan is attached at Appendix 1. This sets out a commitment to invest in primary and community care as a means to improve health and wellbeing and achieve the best use of resources. There is an expectation that this approach, underpinned by the agreed investment, will reduce demand for acute care.

1.3 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.

1.4 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 for local government mean that resources are becoming increasingly focused on meeting immediate eligible need and targeted prevention, as set out in the Core Offer.

2.2 The Public Health Grant continues to be ring-fenced and work is underway through Reconciling Policy Performance Resources to ensure the County Council's investments are achieving the best possible health and wellbeing outcomes for East Sussex residents and delivers the Core Offer.

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

2.4 Providing evidence and therefore justifying investment in preventative services is not simple due to the timeframes involved and the difficulty in attributing improvements health and wellbeing to specific initiatives. There is evidence, for example, 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.

**KEITH HINKLEY**

**Director of Adult Social Care and Health**