

Task and Finish Specification

Promote primary health interventions to reduce the impact of residents living in poor health

Accountable Organisation	Tamworth Borough Council
Descriptive Title	Promote primary health interventions to reduce the impact of residents living in poor health
Statement of purpose	<p>To ensure that staff from a range of agencies are equipped with the knowledge, skills and confidence needed to identify key risks affecting vulnerable people and to act to minimise harm.</p> <p>To ensure that agencies work together to identify those at greatest risk of requiring health interventions and collaborate to minimise these risks.</p>
Background	<p>Many public sector employees and volunteers regularly visit people at home, often for a single purpose. Although skilled in their own areas of work it is possible that these individuals do not always possess the necessary knowledge, skills and confidence to identify indicators of the wide range of the risks which may affect the health and wellbeing of residents. By increasing overall awareness across a range of risk factors and by ensuring that there are clear paths for referral to other agencies it is intended that the identification and management of risk can be improved. This will lead to more timely intervention to reduce future harm and the need for emergency interventions.</p> <p>The identification of risks could include:</p> <ul style="list-style-type: none"> • Fire risk • Mental health issues • Alcohol and drug issues • Property condition issues • Debt • Difficulties with Medication • Risk of trips and falls <p>The project will build and expand on the principals established from the 'Lets Work Together' project currently being piloted in Lichfield. The project will seek to extend the range of agencies involved in Lichfield by ensuring better buy in from health commissioners and providers and involving the third sector.</p> <p>It is recognised that there are many examples of a joined up approach and multi-agency collaboration of key issues in existence through out the borough. The work undertaken in relation to safeguarding awareness and referral is a key example. The project will seek to identify and build on this good practise incorporating all lessons learnt from these areas of work.</p> <p>A meeting has been held of key stakeholders with a further meeting to be held at the end of September to:</p> <p>Scope the project in detail Identify and address resource issues</p>

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	<table> <tr> <td>Common Assault</td> <td>£1,328</td> </tr> <tr> <td>Average Domestic</td> <td>£14,000</td> </tr> <tr> <td>Robbery</td> <td>£6302</td> </tr> <tr> <td>Theft</td> <td>£837</td> </tr> <tr> <td>Criminal Damage</td> <td>£623</td> </tr> </table> <p>Alcohol > NHS cost of alcohol abuse: £2.7billion Health and Economic cost of mental ill-health > £77.4billion</p> <ul style="list-style-type: none"> Examples of savings resulting from implementing changes regarding warmth: <p>Loft Insulation - potential savings up to £150 per year with a payback time of less than 1 year. Savings will vary with the size of house, efficiency of boilers etc and also whether there is already any insulation (therefore the savings will be less)</p> <p>Cavity wall insulation - approximately £115 pa with a 1 year payback time. LDC also assist with heating costs - this may not bring about savings but actually make the occupier warmer.</p> <p>Regarding the financial cost of fuel poverty - most statistics refer to the cost of works required to bring everyone out of fuel poverty, e.g. it would cost £2.2 m to take the 2,660 properties in the district out of fuel poverty. Increasing fuel prices since 2004 have meant that the numbers in fuel poverty is rising.</p>	Common Assault	£1,328	Average Domestic	£14,000	Robbery	£6302	Theft	£837	Criminal Damage	£623
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Implications for other workstreams	<p>Total alcohol project</p> <p>Improve the capacity and skills of parents</p> <p>Reduce the harm and health inequalities caused by tobacco consumption</p> <p>Housing and Health Strategy</p>										
Measures of Success	<p>Number of staff receiving training and number of agencies involved</p> <p>No of referrals made as a result of the project</p> <p>Number of quality outcomes arising from referrals</p> <p>Assessment of cost savings arising from outcomes where these can be measured</p> <p>Staff assessment of training outcomes</p> <p>Client assessment of benefits</p>										
Sponsor/ Champion on TSP	Suzanne Jones										
Mandate	Tamworth Strategic Partnership Board										
Accountable Officer	Rob Barnes Deputy Director Housing and Health										