

Committee: Health and Wellbeing Board

Date: 14.3.14

Agenda item:

Wards:

Subject: East Merton Local Care Centre

Lead officer: Kay Eilbert and Adam Doyle

Lead member: Linda Kirby

Forward Plan reference number:

Contact officer:

Recommendations:

The Health and Wellbeing Board is asked to note progress on development of a Model of Care for East Merton that ensures early detection of disease when it can be cured or managed closest to home, either in primary or community care.

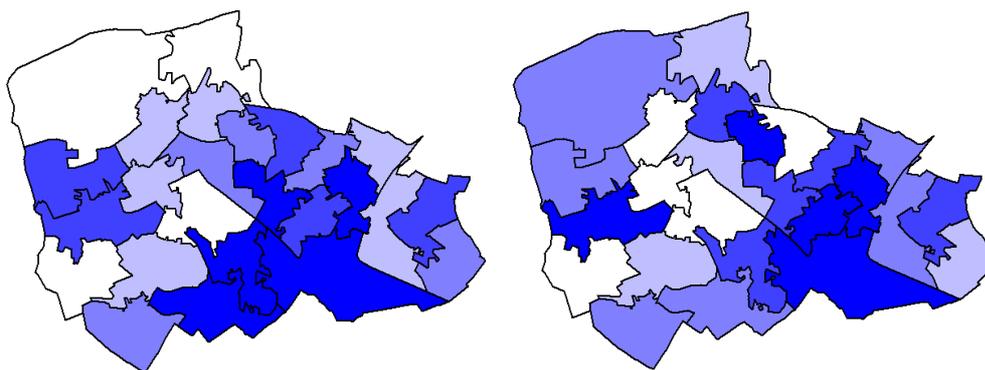
1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

The purpose of this report is to update the Health and Wellbeing Board on progress toward developing a local care centre in Mitcham within a broader new Model of Care.

2. BACKGROUND

The Joint Strategic Needs Assessment sets out the health and social care needs of residents of Merton. Merton has a younger population, mainly located in the East of the Borough, which is more deprived than the West. While overall health outcomes are good, compared to London and England, there are significant inequalities in health outcomes, which is generally measured through life expectancy. The maps below show the differences in life expectancy between the east and the west of the borough. The darker areas represent shorter life expectancy.

Male Life Expectancy at birth by small area 2006-10 **Female Life Expectancy at birth small area, 2006-10**



From 2005-09 to 2006-10 there has been no change in the gap in life expectancy for men (now 71.6 in Ravensbury to 84.8 in Wimbledon). However for women there has been an increase of 2 years in the life expectancy gap (now 79.5 in Figge's March to 92 years in Hillside)

3 DETAILS

The 2013 Merton Partnership Conference focused on health inequalities and the social determinants that contribute to creating them. Data covering determinants of health (early child development, education, and employment) were combined with coronary heart, cancer, and long term conditions such as asthma and chronic obstructive pulmonary disease. All demonstrated a consistent inequality between East and West Merton. People in East Merton tend to be more deprived and from BME groups who tend to develop long-term conditions younger.

Public Health and Merton CCG then agreed to work together to address the health care inequalities in the East. A Health Needs Assessment of health for East Merton residents completed in January 2014 found that for the biggest killers in Merton (coronary heart disease, cancer and respiratory diseases)

- They are more frequent in poorer people.
- They can be prevented. All are related to lifestyle factors such as smoking, obesity, lack of physical activity, an unhealthy diet and excessive alcohol consumption.
- Primary care has a key role in preventing and treating them

The needs assessment therefore recommended

- Improvements should be made in early detection and management of long-term conditions in primary care, especially in East Merton.
- A new local healthcare centre in East Merton should contribute to health improvement in that locality. Its purpose might include accommodating services moving from elsewhere, housing novel services to complement what exists now, providing the public with an accessible point of contact for a range of local services and acting as a focus for quality improvement initiatives in primary care.
- The CCG should consider new models of service provision that involve more care being provided in community settings and less at hospital sites, including intermediate care for people with diabetes for example..

3.1 Conclusions and Recommendations

A task and finish group has been established, which includes representatives from GP practices in the East Merton locality, MCCG, the Council and Public Health colleagues. Members will work together to develop a model of care that ensures early detection of disease when it can be cured or managed in primary or community closest to home. Work will be two fold – over the next year the task and finish group will work to develop a new Model of Care. At the same time, a strategic operating case for the development of a local health care centre in Mitcham is under development for consideration by the Department of Health. This process should be completed by April 2015, when, if approved work can begin on the centre.

The Health and Wellbeing Board is asked to note progress on development of a Model of Care for East Merton that ensures early detection of disease when it can be cured or managed closest to home, either in primary or community care.

4 ALTERNATIVE OPTIONS

N/a

- 5** **CONSULTATION UNDERTAKEN OR PROPOSED**
- 6** **TIMETABLE**
- 7** **FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS**
- 8** **LEGAL AND STATUTORY IMPLICATIONS**
- N/a
- 9** **HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS**
- 10** **CRIME AND DISORDER IMPLICATIONS**
- None
- 11** **RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS**
- 12** **APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT**
- 13** **BACKGROUND PAPERS**
- None

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