

Integrated Care Webinar series 2020/21

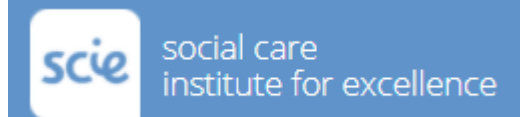


The future of place – planning recovery in partnership

9 November 2020

NHS England & Improvement System Transformation, in partnership with the Social Care Institute for Excellence (SCIE)

NHS England and NHS
Improvement



SPEAKERS

- **Paul Burstow, Chair of SCIE and Chair, Hertfordshire and West Essex STP**
- **Richard Murray, The King's Fund**
- **Donna Hall, Chair, New Local Government Network**
- **Cllr Tim Swift, Leader, Calderdale Council & Chair, West Yorkshire and Harrogate Health and Care Partnership**
- **Ewan King, Deputy Chief Executive, SCIE.**

The future of place

Richard Murray
Chief Executive, The King's Fund

9 November 2020

What we are hearing?

- Covid-19 has underlined the case for collaboration and integration, and it has accelerated some aspects of integration in some areas
- But much of the innovation through Covid was led at a more local level than ICSs/STPs – it's at place-level
- Place as the engine room of cross-system work and community services and a desire to maintain and accelerate progress
- Yet commentary has focused on emergent structures and relationships at ICS level – provider collaboratives, CCG mergers, prospect of legislation
- This highlights the key role of place-based partnerships within ICSs

What works well?

- Start from **purpose, people and communities**, not structures/system architecture
- Partnerships should be **locally driven**; there is no one-size-fits-all model
- **Build on what exists** rather than creating new structures e.g. HWBs, place-based alliances, integrated commissioning arrangements
- Create a **distributed leadership model**. At the heart of this should be a place forum/alliance which brings together a wide range of partners
- **Cultural and behavioural change** is key

The future of place



Developing an in-depth understanding of local communities and neighbourhoods



Working in partnership to coordinate service delivery; building community leadership



Driving service transformation, particularly for community-based services



Mobilising the local community; using resources to support health, social and economic development

Transforming Health and Social Care Through A People & Place Focus

**Professor Donna Hall, CBE
Chair New Local, Bolton NHS FT**

The Impact – Achievements



Contribution to acute stability and system demand. NHS-Social Care Interface Dashboard: Wigan 4th best performing nationally, strongest of 23 Councils in the North West



Radical workforce redesign, high levels of staff satisfaction



Healthy life expectancy in the most deprived areas increased by seven years



Financially stable while still making key investments



89% of domiciliary and 75% of care home providers rated 'good' or 'outstanding'. 3rd most improved nationally



Getting people home from hospital: Wigan best performing in North West and 5th in country



Over three quarters of people supported by our 'Outstanding' Reablement service require no further ongoing social care support



Community Book - innovative online community matching tool plus £10m community investment

A Different Way.....

From a traditional approach

- Individual contracts based on service line specifications that measure outputs and not outcomes
- Multiple providers contracts and conflicting specifications and silo based individual provider focus
- Duplication of provision and overlaps in service delivery
- User effort and confusion in navigating the services across a complex system
- Disease or service specific focused creating dependency
- Getting the best out of the contract for commissioners

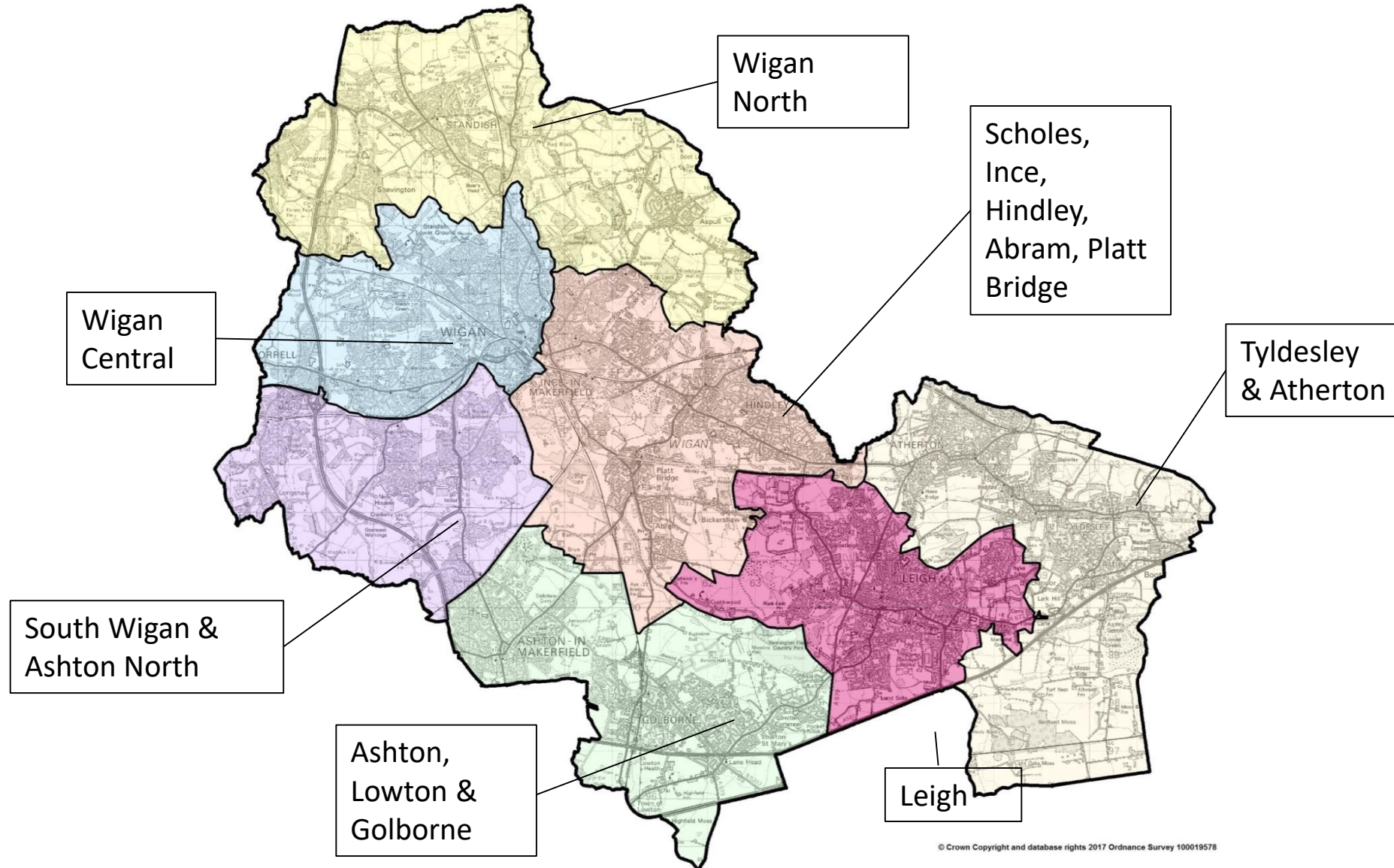


To an asset based approach

- Focus on outcomes and the holistic needs of individuals and their families
- Co-production of frameworks and delivery models between commissioners and providers
- Development of co-ordinated care pathways and reductions in duplication
- Focus on easy access to services and providers working together to provide a seamless joined up arrangements services
- Strengths based promoting independence
- Getting the best out of the system for residents



Integrated Place Based Teams: 30-50k



The Deal

Our part

- Keep your Council Tax as one of the lowest
- Help communities to support each other
- Cut red tape and provide value for money
- Build services around you and your family
- Create opportunities for young people
- Support the local economy to grow
- Listen, be open, honest and friendly
- Believe in our borough

Signed



Councillor David Molyneux, Leader of Wigan Council

Your part

- Recycle more, recycle right
- Get involved in your community
- Get online
- Be healthy and be active
- Help protect children and the vulnerable
- Support your local businesses
- Have your say and tell us if we get it wrong
- Believe in our borough

Signed

The Deal

For providers

Our part

- Develop a diverse and vibrant market that celebrates the assets, gifts and aspirations of Wigan residents
- Work in true partnership with ethical, high quality providers and residents, sharing challenges and co producing solutions
- Create an environment where creativity and innovation thrive based on openness and transparency
- Pay a fair price for high quality provision as part of a total reward and recognition package
- Have high expectations and a rigorous approach to quality assurance

Signed



Councillor David Molyneux, Leader of Wigan Council

Your part

- Provide services that celebrate the assets, gifts and aspirations of Wigan residents
- Demonstrate a relentless pursuit of quality and ethical provision that delivers the best possible outcomes for Wigan residents
- Provide creative and innovative solutions and embrace collaboration and transparency
- Provide value for money and a decent reward and recognition package for your well motivated and supported workforce
- Strive for excellence and passionately engage in quality assurance

Signed

The Deal Principles = Asset Based Commissioning

Different conversations



Different conversations with partners, part of collective endeavour to support Wigan citizens to live great lives. Co-production, relationships, trust, shared outcomes (plus robust decommissioning when required)

Know your community



Citizen and community knowledge drives market shaping. Neighbourhood based focus, e.g. Homecare, understanding Wigan as a place important element of tender process, share tools such as Community Book to help partners connect citizens to their community

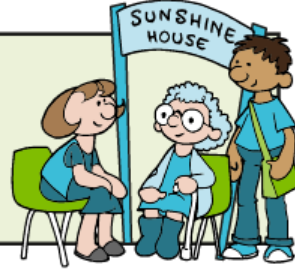
Place based teams



Providers key part of place based models, connected to huddles, community assets and wider reform agenda e.g. Care Homes, Wellbeing Teams

The Deal Principles = Asset Based Commissioning

An asset-based approach



Asset based approach embedded into our commissioning model, recognising assets of people, communities and partners and ensuring all support recognises and develops the assets of our communities and citizens. Inclusion driving principle

Staff attitude and behaviours



Be Wigan behaviours of Be Positive, Be Accountable and Be Courageous shared by commissioners, partners and front line staff – reframes relationship, all energy focussed on high quality and great outcomes

Permission to innovate



Wigan asset based commissioning liberated creativity and passion of partners to deliver great outcomes and positive experience to citizens e.g. people powered technology. Enabled innovators such as Community Circles and Wellbeing Teams



social care
institute for excellence

The future of place: planning for recovery in partnership

Ewan King, Deputy Chief Executive, SCIE

From place-based to place-led



Financial reform as an enabler of change in Bradford: An in-depth case study

Gain an insight into how financial and other reforms in Bradford are making a difference to system partners, staff and residents in the West Yorkshire city.

Podcast: Financial reform: A day in Bradford

In this podcast, listen to system leaders discuss how collaborative working is making a tangible difference.

From place-based to place-led

Read about a whole-area approach to integrating care systems.



Financial reform as an enabler of change in Bradford

An in-depth case study



Why place?

- Majority of activity which addresses wider determinants of health are commissioned and delivered at place level
- Democratic legitimacy: builds on most places to the Health and Wellbeing Board arrangements
- Local people understand and identify with local places

“Our ambition is that the overall plan for each place feels like it is the people’s plan for the place – their plan. To enable this, we make sure that within our governance structure we have the public and third sector and NHS and council involved at the highest level.”

Rob Webster, ICS Lead, West Yorkshire and Harrogate Health and Care Partnership

“A health system based on prevention and health equity would involve a focus on place – on small areas and on influencing the environment and social and economic conditions of places in order to improve the health of residents, especially for the most disadvantaged areas.”

Health Foundation, The Marmot Review 10 Years On



Features of place based approach



Co-producing a compelling vision for place-based working

- System leaders, working in partnership with local partners and communities, have a shared definition of the local place
- Main partners in the system, including local authorities, voluntary sector and PCNs, work together to agree priorities for the local population and a narrative for the place
- People with lived experience been actively involved in developing these priorities and the narrative

Widely understood and agreed approach to place-based governance

- System leaders clear which decisions are devolved to place level, and where and how they are taken, either through a new place-based board, joint commissioning arrangements or HWBs
- Local partners have an agreement or a MoU which defines the ways of working and expected partnership behaviours

Features of place based approach

Engaging local government and other partners

- Elected members involved throughout the process of developing a narrative and place-based planning
- Place-based board have representation from elected members, local government, primary care networks, the private sector, voluntary and community sector

Engaging local government and other partners

- Elected members involved throughout the process of developing a narrative and place-based planning

“Achieving ICS status is not an end in itself. What matters is whether we make a difference to the health and quality of life of the populations we serve. Taking shared responsibility for population health is the most important shift our partnership must make in 2020.” **ICS Chair**

Features of place based approach



Prioritising the needs of communities and drawing on their assets

- Leaders bring together local providers with a clear commitment to working together to improve population health using population health management approaches
- Leaders have a shared commitment to asset-based approaches?

Balancing system finance management

- Partners have a shared understanding of the available financial resources and local financial pressures?
- Finance leaders operate an open book approach to financial planning
- Financial controls enabling the alignment of resources to health and care outcomes

Features of place based approach

Engaging and co-producing plans with local citizens

- Local citizens and people with lived experience involved in the governance decision making at place level leaders
- Leaders set expectations for co-production arrangements, which ensure that people with lived experience and carers are involved in the design, planning, commissioning and evaluation of local services

The Citizens' Assembly brought together a cross-section of local residents for discussions around health and care services in the borough. These discussions are leading to expectations for the Council and local health and care organisations. These will inform the Camden Joint Health and Wellbeing Strategy, which will act as a framework for health and care services in the borough over the next few years.



Impact of Covid-19

“COVID-19 has demonstrated the critical importance of integration. Many of the solutions that have been developed in response to issues such as PPE and resource shortages, patient discharge and community outreach have centred around collaboration and partnership working across primary, secondary and community services, and with local government and community partners.

NHS Confederation, NHS Reset, A new vision for Health and Care, September 2020

“We will strengthen how systems operate, across all parts of the NHS, and tie in tightly with local authority colleagues who share our mission to the populations we serve. So bringing to bear the whole wealth and diversity of experience that exists in a local area.”

Matt Hancock, October 2020



A recording of the webinar, slides and resources will be shared
on the **Integrated Care Learning Network.**

To join the network email

integratedcare-manager@future.nhs.uk

9 November 2020

NHS England and NHS
Improvement

