

# HEALTH AND WELLBEING BOARD



<b>TO:</b>	Health and Wellbeing Board
<b>FROM:</b>	Sayyed Osman
<b>DATE:</b>	25 September 2018

**SUBJECT: The Pennine Plan**

## 1. PURPOSE

This paper provides an overview of how the proposals for improving health, care and wellbeing services across Pennine Lancashire have been developed. It recommends the Pennine Plan for consideration and approval (attached in full as appendix A). This report also provides an overview of the engagement approach undertaken to test the Draft Pennine Plan and a summary of responses received during the engagement. These have been used to shape the final version of the Pennine Plan.

The development of a Pennine Lancashire Integrated Care Partnership, within the Lancashire and South Cumbria Integrated Care System, is central to delivering the Pennine Plan. The recently launched Blackburn with Darwen Local Integrated Care Partnership will drive delivery within the 4 Neighbourhoods across the Borough. The Pennine Plan has been developed in collaboration with Blackburn with Darwen Borough Council and impacts upon a number of departments including Adult Social Care, Neighbourhoods, Public Health, Children's Services, Wellbeing Services and Resources. It describes and builds upon the developments within the Council with respect to both developing a place based integrated neighbourhood offer and further developing effective specialist and enhanced services able to meet the future needs of residents.

The Model of Care described within the Pennine Plan comprises of 7 elements which are central to the way in which our services and workforce will develop going forward:

**Me and My Family:** Putting each of us in control of our own health and wellbeing, enabling us to live in good health for as much of our life as possible and to manage any illnesses we might have.

**My Healthy Home:** Enabling a positive home environment, wherever we live, including the physical quality, suitability and stability of our homes.

**My Healthy Community:** Empowering and supporting people within our communities to take more control over their health and lives; strengthening volunteering and support networks to improve the health and wellbeing of others.

**Living Happy, Healthy and Well:** Encouraging and enabling us all to maintain healthy lifestyles, in environments that promote health and that will help to prevent us from becoming unwell.

**Keeping Happy, Healthy and Well:** Supporting everyone to stay well and helping people manage their own health and care better.

**Joined-Up Care and Support:** Bringing services together to improve standards of care and reduce duplication of activity. Providing seamless links between services and linking people into support within local communities.

In-Hospital Care and Support: Ensuring that when we need specialist or acute support, in hospital, we receive the best, most effective care possible.

## **2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD**

Health and Wellbeing Board is recommended to:

- Note the content of the Pennine Plan
- Note the engagement approach undertaken to test the Draft Pennine Plan and a summary of responses received during the engagement
- Provide any feedback and comments on the Pennine Plan
- Approve the Pennine Plan as the overarching blueprint for health and care transformation in Pennine Lancashire.
- Notes that whilst this plan identifies direction of travel and is for noting, that any key decisions required in the implementation of the plan, relevant and impacting on this council, will be brought forward to the relevant boards for decision.

## **3. BACKGROUND**

In 2016, health and care organisations in Pennine Lancashire agreed to work together to address the greatest issues of challenge in relation to health, care and wellbeing, and to work together as a single public sector economy for Pennine Lancashire.

We believe this is the best approach to improving the health and wellbeing of all who live and work in Pennine Lancashire. The New Model of Care puts people, their families and communities at the heart of everything, aiming to put them in control of their own health and wellbeing, so they can remain as healthy as possible for as long as possible. If people do become ill, the New Model of Care aims to ensure they receive the right level of support within their home or local area. When specialist or enhanced support is needed (for example in hospital), people will receive care that is safe, effective and shaped around their individual needs. In December 2017 the Integrated Health and Care Partnership published a draft of the Pennine Plan, to test proposals for change with a broad range of stakeholders, and gather feedback and insight to inform more detailed service specifications and implementation plans.

## **4. RATIONALE**

Across Pennine Lancashire we face a number of challenges that contribute to increasing demands for service provision and that local people are more likely to experience ill health than people living in other areas of the country:

- Children and young people are not getting the best start in life
- Mental illness is more common than in other areas of the country
- Many people have diseases and health conditions that are preventable
- Many more people attend accident and emergency than in other areas of the country
- People are living longer but with more complex needs
- Increasing pressures are being placed on our services and demand for services is outstripping the money we have to pay for health and social care.

The Pennine Plan sets out the response to these issues, and has been developed through a Solution Design approach that ensured a wide range of health and care professionals and patient representatives were involved in developing the blueprint for a New Model of Care for Pennine Lancashire. Health and Wellbeing Improvement Priorities have been identified where Pennine Lancashire is performing poorly compared to other similar areas for these issues, either in terms of population outcomes, quality of care, or spend on services. A Prevention Framework has been

developed which will embed prevention across every aspect of our future plans.

## **5. KEY ISSUES**

The Pennine Plan reflects the view that working together is the best way to deliver real improvements for local people, and as a Partnership we have worked with staff and residents to identify how we want our shared future to be. The plan describes shared principles, enablers, workforce development requirements, resource modelling and the emerging new models of care. The Blackburn with Darwen Local Integrated Care Partnership will support (but not be restricted to) the development and delivery of the outcomes described within the Pennine Plan as they relate to Blackburn with Darwen residents.

The Pennine Lancashire Integrated Care Partnership will:

- Take shared responsibility for delivering agreed performance goals and improving shared outcomes
- Manage funding for our population through a financial system 'control total' across Clinical Commissioning Groups (CCGs) and service providers
- Create an effective collective decision making and governance structure, aligning the ongoing and continuing individual statutory accountabilities of partner organisations
- Demonstrate how provider organisations will work together to integrate services in partnership with local GP practices, formed into clinical hubs serving 30,000-50,000 populations
- Ensure an understanding of the health needs of our population and ensure that services are commissioned and delivered to respond to these needs in the most effective way
- Establish clear mechanisms by which residents are able to exercise patient choice
- Take shared responsibility for continuing to improve the efficiency, effectiveness and quality of health and care services.

The final version of the Pennine Plan has now been produced. Key changes from the published draft version are summarised below:

- Updating of terminology such as replacing references to accountable care systems and partnerships with integrated care systems and partnerships
- Simplification of the language used where engagement highlighted particular concerns, for example in relation to food poverty and finance
- Inclusion of further detail which more accurately reflects the scale of opportunities and ambition for Pennine, for example in relation to digital developments
- Explanation of how key areas of work will be taken forward through agreed or developing strategies and framework such as the Pennine Lancashire Volunteer Strategy
- Updating of figures and dates as appropriate
- Inclusion of reference ensuring people are made more aware of what services can support them, to help people to make the right choices, particularly by promoting the NHS Choose Well campaign.

Alongside the Pennine Plan will be a Delivery Plan, which will set out to stakeholders how we are already progressing and delivering key elements of the New Model of Care. This will address queries raised by some stakeholders, regarding the mobilisation and implementation and provide an important opportunity to highlight the significant work already underway across partner organisations to progress the vision.

## **6. POLICY IMPLICATIONS**

The Pennine Plan, Place-Based Integrated Care Partnership, within the Lancashire and South Cumbria Integrated Care System aligns fully with the NHS Five Year Forward View and its 'triple aim' of addressing the current challenges in health and wellbeing, care and quality & funding and efficiency. The approach taken in Pennine Lancashire, as well as in Blackburn with Darwen is fully supported by independent evidence, such as that of the King's Fund (NHS Ten Year Plan, July

2018), which states that 'improving health and reducing health inequalities depends on making further progress in integrating health and social care, building on the development of new care models, and integrated care systems'.

## **7. FINANCIAL IMPLICATIONS**

The Pennine Plan describes the public sector spending on health and social care residents of Pennine Lancashire and the financial challenges of meeting the increasing complexity of health needs and demands for services.

Whilst there is significant financial challenge there are also significant opportunities and work is underway across all partners to ensure we make best use of resources to:

- Improve the efficiency of the services we deliver
- Invest in prevention and population health
- Design and implement new models of care
- Maximise use of One Public Estate
- Utilise Digital and Technological Innovation.

A System Control Total has been agreed on behalf of the Pennine Lancashire Integrated Health and Care Partnership which details how we will manage our money together and a financial strategy to support this is being completed and includes in its core principles delivering the best value for 'the Pennine pound' and 'One Public Estate.'

## **8. LEGAL IMPLICATIONS**

There is a general legal duty on local authorities and other relevant health care bodies to promote integrated working. The Health and Social Care Act 2012 established Health and Wellbeing Boards in each local authority with a 'duty to encourage integrated working.' It also requires the NHS Commissioning Board and individual Clinical Commissioning Groups to promote integration of health services where this would improve quality or reduce inequalities.

Furthermore the Care Act 2014 requires local authorities to promote the integration of health and care provision where this would promote wellbeing, improve quality, or prevent the development of care needs. The decision in principal to work within this local integrated partnership will be subject to the development of an effective collective decision making and governance structure, aligning the ongoing and continuing individual statutory accountabilities of partner organisations and their respective decision making processes. Other matters which will need further consideration include information governance arrangements and procurement of services etc.

## **9. RESOURCE IMPLICATIONS**

Partners from health and social care are already working together to improve how estates are used and where services and workforces can be co-located. The Pennine Plan describes the principle of 'digital first or digital only' as a means to maximise technological developments to give people greater control over their health, care and lifestyle choices.

The Lancashire Local Digital Roadmap identifies 3 broad themes to support delivery and improve efficiency:

- Sharing of electronic records
- Empowerment through the sharing of knowledge
- Enabling resident and workforce with technology.

The Pennine Plan describes the vision of One Workforce in the acknowledgment of the need to work with colleagues across all organisations to support a flexible, resilient and highly skilled workforce. A number of specific workforce priorities have been identified within the New Model of Care which includes:

- Current workforce modelling
- Securing future workforce supply
- Upskilling staff; Developing New Roles
- Consideration of new employment and Contracting Models.

## 10. EQUALITY AND HEALTH IMPLICATIONS

**Equality Impact Assessment (EIA) not required – the EIA checklist has been completed.**

## 11. CONSULTATIONS

A detailed report of the Communications and Engagement programme is available at [www.togetherahealthierfuture.org](http://www.togetherahealthierfuture.org). Publication of the Draft Pennine Plan was accompanied by a significant programme of communications and engagement to promote, explain and discuss the content of the plan and elicit views from the public, stakeholders and staff about the draft plan. Building on considerable public and stakeholder engagement undertaken since the inception of Together A Healthier Future in 2016, this engagement programme included:

- Promotion of the plan online through social media. The Facebook story about the draft plan reached 44,709 individuals and on Twitter promotion of the draft plan reached 36,127 users. A total of 13,751 visitors visited the Together A Healthier Future website over this period of engagement
- A programme of public relations and media engagement resulting in positive and accurate coverage in all print media of the draft Pennine Plan and our call for views about it
- Workforce engagement via staff newsletters, public bulletins, features on their social media pages, intranet and websites
- A specific targeted engagement exercise with the Traveller community in Pennine Lancashire
- An open invitation from the partnership to every known stakeholder group within the voluntary, community and faith sector, patient interest groups, and staff groups and networks to attend, present and discuss the Draft Pennine Plan
- Market stalls in key locations across Pennine
- Co-production of an “easy read” version of the draft Pennine Plan with representatives of the learning disability community which was well received and accessed by a large number of people.

A significant amount of feedback was received on the Draft Pennine Plan. This included formal responses from 377 individuals, alongside the key messages from the market stalls and meetings attended. The responses and feedback clearly support the proposals set out in the Draft Pennine Plan. While there was some concern expressed about financial viability and sustainability, people recognised the ambitions we have outlined for Pennine Lancashire. This feedback will be used to inform the development of detailed delivery proposals.

<b>VERSION:</b>	
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<b>CONTACT OFFICER:</b>	Sayyed Osman / Katherine White
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<b>DATE:</b>	6 September 2018
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<b>BACKGROUND PAPER:</b>	The Pennine Plan
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