

North Tyneside Health & Wellbeing Board Report Date: 28 April 2016

ITEM 9

Title: Integration
Programme Board Update

Report from : Integration Programme Board

Report Author: Ian Lane, Improvement Manager, North Tyneside Council. (Tel: 0191 643 7058)

1. Purpose:

To provide the Board with an update on the work of the Health and Social Care Integration Programme Board along with updates from the four work streams; Self Care and Prevention, New Models of Care, Older People, Urgent Care. The update provides an opportunity to identify areas for celebration and areas for further work.

2. Recommendation

The Board is asked to note the updates from the four work streams of the Health and Social Care Integration Programme Board.

3. Policy Framework

This item relates to chapters 6 and 8 of the Joint Health and Wellbeing Strategy 2013-18.

4. Information:

4.1 Background

The Health and Social Care Integration Programme Board oversees progress of the North Tyneside Health and Social Care Integration Programme's four work streams:

- New Models of Care (Lead – Lesley Young-Murphy)
- Older People (Lead – Lesley Young-Murphy)
- Urgent Care (Lead – Matthew Crowther).
- Self Care and Prevention (Lead – Dr John Matthews)

The Board coordinates the reporting of progress of these four work streams to the Health and Wellbeing Board (HWBB).

The Health and Social Care Integration Programme Board works with work stream leads to assure itself that the views and experiences of local communities, the public and patients and users of services are reflected in system and service changes.

4.2 **Current Position**

Since the last Health and Wellbeing board meeting the Integration Programme Board has met on one occasion (1/3/16). The board aims to meet once in between each Health and Wellbeing board meeting.

4.3 **Key reporting highlights from the Integration Board meeting in March 2016**

Older Peoples Board (presented by Kevin Alan)

Care Point – the bringing together of the reablement service and the hospital discharge team, has moved a step closer as both teams are now located at North Tyneside General Hospital. They are on track for a single management structure to be in place in April however the teams are not in the same location. There is substantial work still to do to bring the teams together and this needs to be a high level intervention with Northumbria Healthcare Foundation Trust (NHCFT).

Commission an agile, interoperable technological solution in relation to availability of hospital beds. This issue will be discussed at the next Older Persons Board meeting as there is a view that a technological solution is no longer required for this.

Falls Pathway – this service is currently underused. It was identified that this pathway is not being marketed to Primary Care. Further work on this will also be undertaken in relation to the Care Point and Care Plus initiatives.

New Models of Care (presented by Gary Charlton)

Two GP's with special interest have been appointed to Care Plus. However the pilot has been delayed due to IT issues. This is due to go live on Monday 7th March. It has not been possible, so far, to locate the service with Care Point despite this request being made. The Care Plus pilot will be evaluated in a number of different ways, including key performance indicators, before decisions about roll out are made.

Urgent Care – Matthew Crowther

The Urgent Care group is currently holding joint meetings with Northumberland System Resilience Group and together they are focused on assurance and resilience in Urgent Care. The group were successful in a bid for additional government funding to cover the winter period and chose to invest this in GP's within North Tyneside and NSECH. Some of this money was also given to the Council with good feedback being received.

The board noted pressure around ambulance and public access to NSECH.

Self Care and Prevention – John Matthews

Procurement of a replacement for the Adults Case Management System (AIS) – the Council is looking to replace AIS and also looking to procure a new web portal at the same time.

Public health campaigns are going well.

Strengthening Self Care Information and Campaigns: this is a focused and successful piece of work. Preliminary work has focused on weight and diabetes / obesity and promoting a healthy workforce.

Integration Board Priorities 2016/17

All Boards agreed to review their action plans. The priorities for 2016/17 will be circulated to members of the Health and Wellbeing Board for consideration in advance of the planning day at the end of April.

5. Decision options:

Not applicable as this report is for information only.

6. Reasons for recommended option:

Not applicable.

7. Appendices:

Programme Board updates for the four work streams are attached

8. Contact officers:

Self Care and Prevention – Dr John Matthews – GP and Clinical Commissioning Group
Clinical Chair – Park Road Medical Practice – 0191 262 5680

New Models of Care - Lesley Young-Murphy - Executive Director of Nursing & Transformation - North Tyneside Clinical Commissioning Group – 0191 293 1146

Older People – Lesley Young-Murphy - Executive Director of Nursing & Transformation - North Tyneside Clinical Commissioning Group – 0191 293 1146

Urgent Care – Matthew Crowther - Commissioning Manager - NHS North Tyneside Clinical Commissioning Group - 0191 293 1161

Ian Lane – Improvement Manager – Transformation, Wellbeing and Governance Team, North Tyneside Council – 0191 643 7058

9. Background information:

The following background documents have been used in the compilation of this report and are available from the author:

- Integration Programme Board minutes of previous meetings
- Programme Board updates received for the work streams.

COMPLIANCE WITH PRINCIPLES OF DECISION MAKING

10 Finance and other resources

There are no additional financial implications for the Council or its partners in terms of updating the activity of the work streams.

11 Legal

There are no legal implications directly arising from this report.

12 Consultation/community engagement

The Integration Programme Board has representation from Healthwatch North Tyneside. The individual work streams each have representation from the voluntary and community sector. In addition each work stream has responsibility for undertaking its own engagement work and reporting on this to the Integration Programme Board. An update on the engagement work of each work stream is detailed in the attached update documentation.

13 Human rights

There are no human rights implications directly arising from this report.

14 Equalities and diversity

There are no equalities and diversity implications directly arising from this report.

15 Risk management

The purpose of this report is to appraise the Health and Wellbeing board about what is happening locally. There are no direct risk management implications as a result of this report.

16 Crime and disorder

There are no crime and disorder implications directly arising from this report.

SIGN OFF

Director of Public Health

Chair/Deputy Chair of the Board

Chief Finance Officer

Head of Law & Governance