North Tyneside Health & Wellbeing Board Report Date: 14th February 2017

Title: Health and Social Care Integration Programme Board Update

ITEM 8

Report from : Health and Social Care Integration Programme Board

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

1. Purpose:

To provide the Health and Wellbeing Board with an update on the work of the Health and Social Care Integration Programme Board along with updates from the four work streams; New Models of Care and Older People, SEND / Whole Life Disability and Mental Health Integration Board. The update provides an opportunity to identify areas for celebration and challenges.

2. Recommendation

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

- New Models of Care
- Mental Heal Integration Board
- SEND / Whole Life Disability Board
- Older People

3. Policy Framework

This item relates to chapters 6 and 8 of the North Tyneside 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)
- Mental Health Integration Board (Lead Ruth Evans)
- SEND / Whole Life Disability Board (Lead Scott Woodhouse)

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

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 (13th December 2016).

4.3 Key reporting highlights from the Integration Board meeting in December 2016

New Models of Care - Care Plus development - Lesley Young-Murphy **Highlights** (first 5 months)

- Reduction in hospital admissions by 19%
- Reduction in length of hospital stays by 36%
- Approximately 1,100 complex (30 mins) GP appointments saved.
- 141 referrals to Age UK with 84% of patients either having their personal goals met or currently working towards

Opportunities for Improvement

- New ways of working by enhancing the alignment of existing staff
- Increase number of referrals
- Maximise outpatient efficiencies

Plans for the Future

- Roll out the model across the other 2 localities (another 14 GP Practices) within North Tyneside
- Northumbria University evaluation
- Sharing best practice developed in the model

Mental Health Integration Board - Scott Woodhouse

Last year the Health and Wellbeing Board agreed the joint Mental Health and Wellbeing strategy. An action plan has now been developed to support the strategic aims. Reporting highlights include:

- Crisis Care Concordat the CCG and local authority remain 'on track' to update this by March 2017
- Extension of IAPT/Talking Therapies to include people with long term conditions and medically unexplained symptoms: The Memorandum of Understanding between NHS England, the CCG and Northumbria Healthcare has been signed. The recruitment process is underway and there are a high number of applicants; the service is confident it will recruit to the new posts
- **Personalisation** A number of block contracted arrangements with service providers have come to an end. These arrangements are being replaced by personal budgets, with the aim of supporting customers to use a Direct Payment, where appropriate.

Older People Work Stream: Intermediate Care – Lesley Young-Murphy

- The Intermediate Care service specification has not yet been finalised. It is being discussed with Northumbria Healthcare and Akari Care
- The newly developed Intermediate Care Peripatetic Team will contain staff from the team formerly located at The Cedars
- GP's from North Shields are leading the medical side of the Intermediate Care Service. Holistic care records are being used between Northumbria Healthcare Trust and the new service

SEND / Whole Life Disability Board - Scott Woodhouse

- Integrated Assessment Group Education to Employment for people with a disability is one of the priorities of this work stream and the group will be exploring what further action is needed to support this key point of transition. There is a need to do more work with Further Education providers about the courses they offer and future developments required
- Value for Money and Joint Commissioning Group The 'Local Offer' from Education, Health and Care has been refreshed and embedded on the council website. This group is also developing the housing options and opportunities available for people with a disability
- **SEND Impact Group** The Ofsted SEND inspection is due at any time. Membership of the group preparing for the inspection has been identified and a communication plan is in place

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:

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

SEND / Whole Life Disability – Scott Woodhouse - Strategic Commissioning Manager, Whole Life Disability, North Tyneside Council, - 0191 643 7082

Mental Health Integration Board - Scott Woodhouse - Strategic Commissioning Manager, Whole Life Disability, North Tyneside Council, - 0191 643 7082

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 and terms of reference
- 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

