

Joined Up Care Derbyshire - Update

SUMMARY

- 1.1 Our local sustainability and transformation partnership is known as Joined Up Care Derbyshire (JUCD). It aims to help meet the 'triple challenge' set out in the [NHS Five Year Forward View](#) to work and plan much better together, focusing on new ways of working to:
- Help keep people healthy.
 - Give people the best quality care.
 - Run services well and make the most of available budgets.
- 1.2 As previously reported to the Health and Wellbeing Board (HWB), eight Place Alliances have been agreed and aim to shift the focus of health and care services to enable citizens to take responsibility to maximise their health and wellbeing. Derby City Place Alliance has had their first meeting and work is underway to agree priorities.
- 1.3 Significant work is underway to understand and develop our workforce including:
- Two engagement events were held earlier this year to share the thinking so far on meeting the national targets and to seek input from general practices and other stakeholders in relation to the GP Forward View.
 - The development of a JUCD STP Talent Academy.
 - Derbyshire has received as allocation of £508,320 for workforce transformation in 18/19.
- 1.4 JUCD STP Derbyshire has been successful in the application process to develop specialist perinatal mental health community services during 2018/19.
- 1.5 A new JUCD website is scheduled to go live on the 11th July. A video is being produced to describe the Derbyshire 'case for change', setting the scene about the challenge the health and care system faces.
- 1.6 In line with the national direction of travel, JUCD is expected to continue its progression into becoming an Integrated Care System (ICS). In neighbouring parts of the country integrated care systems have already begun to progress. NHS organisations, in partnership with local councils and others, take collective responsibility for managing resources, delivering national standards, and improving the health of the population they serve.

- 1.7 In Derbyshire it is planned that an ICS will be in place by April 2019 – at least in shadow form. This will see organisations act together as a strategic commissioner - overseeing services, standards and how resources are allocated. Commissioning for local communities will take place through the Place Alliances.

RECOMMENDATION

- 2.1 To note the update on Joined Up Care Derbyshire.
- 2.2 To consider how the HWB would like to receive future updates from JUCD and how it may want to support the work of specific work-streams.

REASONS FOR RECOMMENDATION

- 3.1 To ensure the Health and Wellbeing Board remains fully briefed and involved in the ongoing development and delivery of Joined Up Care Derbyshire.

SUPPORTING INFORMATION

Background

- 4.1 NHS, local councils and wider partners came together in 44 areas covering all of England during 2016 to develop proposals to improve health and care. The organisations formed new partnerships – known as sustainability and transformation partnerships (STPs) – to plan health and social care jointly for the next few years.
- 4.2 Our local sustainability and transformation partnership is known as Joined Up Care Derbyshire. It brings together twelve partner organisations and sets out ambitions and priorities for the future of the county's health and care.
- 4.3 The partnership aims to help meet the 'triple challenge' set out in the NHS Five Year Forward View to work and plan much better together, focusing on new ways of working to:
- Help keep people healthy.
 - Give people the best quality care.
 - Run services well and make the most of available budgets.
- 4.4 In Derbyshire more than 20% of the population is over 65. As life expectancy increases so do the ailments of old age and there are now more people than ever before living with chronic illnesses like heart failure and arthritis.
- 4.5 Our aim is to focus on looking after people in their home or local area, so they get better quicker, instead of concentrating services in specific buildings. By tailoring care to people and communities, patients get better, more targeted support to stay well. (See Appendix 2 The Derbyshire model of care also known as the Wedge locally).

- 4.6 Financially if we don't change the way we work together, we will continue to spend money we don't have. This year alone the NHS is over spent by an estimated £80 million and this does not take into account the councils financial challenge in both the city and county. We have to take action and make some radical changes.
- 4.7 To support all the organisations working on Joined Up Care Derbyshire, a Governance agreement was set out outlining each individual agency's role in transforming health and care. A link to the Governance arrangements can be found here <https://joinedupcarederbyshire.co.uk/what-is-joined-up-care-derbyshire/governance/>.
- 4.8 The current governance structures in place include:
- STP Board.
 - Provider Alliance Group (PAG).
 - Clinical and Professional Reference Group (CPRG).
 - Engagement Forum (EF).
- 4.9 The CPRG have developed and agreed a clinical strategy to inform all plans and decisions to make sure that work for Joined Up Care Derbyshire is in line with clinical best practice.
- 4.10 To deliver the plans set out by Joined Up Care Derbyshire, a number of workstreams have been established:
- Cancer.
 - Children and young people.
 - Learning disabilities.
 - Maternity.
 - Mental Health.
 - Place.
 - Planned care.
 - Primary care.
 - Urgent care.

Each workstream is led by a Senior Responsible Officer from one of the partner organisations

- 4.11 A newly established JUCD STP Assurance and Delivery Group is now in place and met for the first time in June 2018. The purpose of the group is to gain assurance on behalf of the JUCD STP Board that the agreed STP Programmes are delivering key work-streams that will deliver the agreed model of care.
- 4.12 The new group has representation from the commissioner PMO to ensure alignment and transparency between STP work-streams and related commissioner financial recovery. Not all Programmes will have a financial savings target attached, however those that do will be required to report on delivery both operationally and financially.

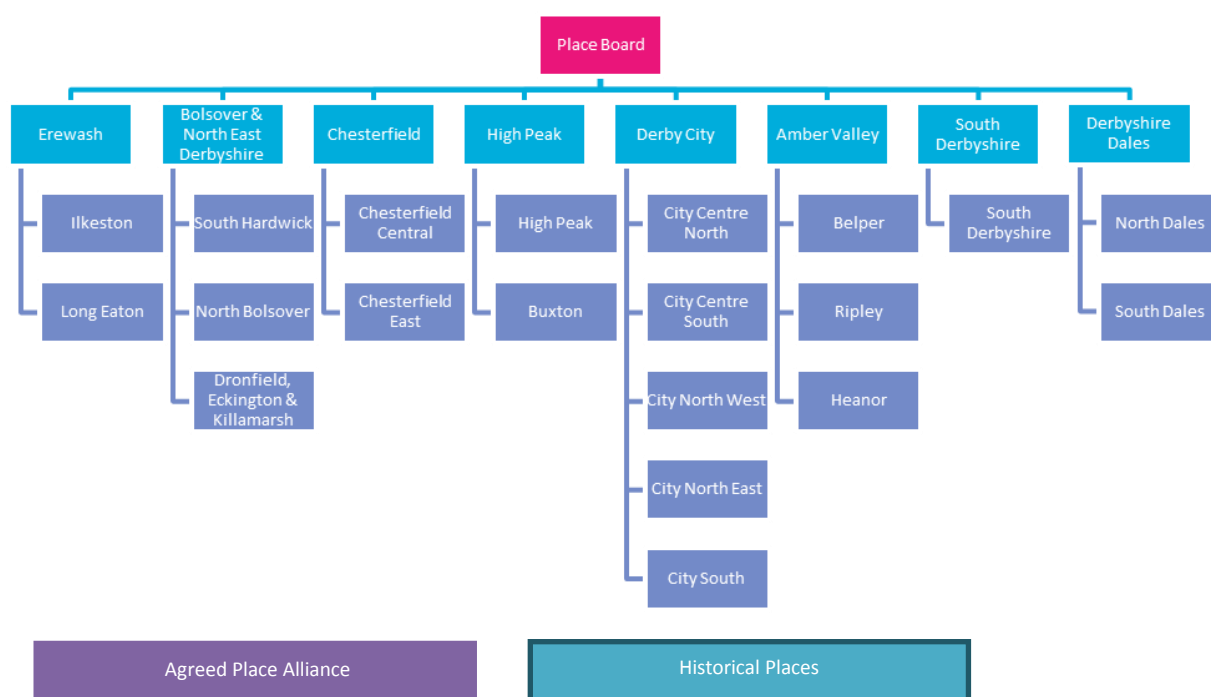
STP Leadership

- 4.13 The STP leadership has been considerably strengthened with the STP Director post and STP Finance Director post. In order to further support the strengthening of JUCD leadership, an advertisement for a full time substantive STP Director has been placed. An announcement is expected imminently.

Highlights of JUCD work:

Place

- 4.14 Following review of the number of Places, the STP Place Board agreed earlier this year to the following configuration of Place Alliances:



- 4.15 Place Alliances will be responsible for the development of services to best meet their populations needs within available resources. They will shift the focus of health & care services to enable citizens to take responsibility to maximise their health & wellbeing.
- 4.16 The Place Alliance members will collaborate to meet the needs of a defined Place population and will:
- Understand the Place population health and care needs.
 - Jointly review local performance and outcomes, driving improvement in these where needed.
 - Ensure equitable services for the Place population.
 - Use information and local knowledge to drive service change.

- Understand Place population resource usage and ensure this is used as effectively as possible.
- Hold each other to account for service development & delivery.
- Be active participants in the development of clinical models and pathways.
- Develop robust links between services at a local level.
- Co-ordinate delivery of high quality care in the community and in people's homes, working across organisational boundaries.
- Plan & case manage care for people at high risk of hospital and care home admission.
- Provide targeted support for people with Frailty and other long- term conditions.
- Help people remain in good health through screening & provision of advice and other forms of support.
- Enabling people to die in the Place of their choice.

4.17 Derby City Place Alliance has had their first meeting and work is underway to agree the priorities for the Alliance.

Winter pressures

- 4.18 The JUCD Board agreed that external support from Newton Europe, a consultancy who have demonstrated significant impact in many health systems over recent years, will carry out a piece of work to support the better use of the systems limited resources around urgent care flow in Derbyshire.
- 4.19 Newton Europe has already begun to bring the system together and the results are expected imminently on their recommendations.

Workforce development

- 4.20 GP Forward View - Two engagement events were held earlier this year to share the thinking so far on meeting the national targets and to seek input from general practices and other stakeholders. Some of the key areas for further work were:
- Having a more consistent approach to developing the general practice workforce and working closely with practices to explore the potential for new roles including Advanced Clinical Practitioners and Physicians Associates, and the mechanisms for introducing them.
 - Developing approaches to foster greater collaboration to facilitate working at scale.
 - Promoting awareness and understanding of new models of care with citizens.
 - Working together to establish and maintain an accurate picture of the general practice workforce so we know where the pressure points and risks are, and can work collaboratively to address them.
 - Working on how we can better attract and retain people into general practice, e.g. through introducing more flexible working patterns and reducing the factors

that cause excessive stress.

JUCD STP Talent Academy

- 4.21 The Talent Academy is a partnership between health and social care organisations to increase the numbers of people entering the health and care workforce and to work collaboratively to retain staff and offer career progression. Two formal launch events were held in April, where the new Health and Social Care Support Worker Apprenticeship, developed in Derbyshire was announced.

Further information is available at <https://joinedupcarederbyshire.co.uk/talent-academy/>

Workforce funding

- 4.22 Derbyshire has received as allocation of £508,320 for workforce transformation in 18/19. Potential projects will need to be approved by the LWAB. These funds are for use within the financial year 2018-2019 and should directly contribute to the delivery of one of the eight investment themes listed below and the overarching goal of ensuring the NHS workforce have the clinical skills to enable and not constrain workforce and service change:

1. Upskilling and developing the support worker.
2. Upskilling our registered professionals and others to take on extended & advanced roles including non-medical prescribing in priority service areas.
3. Supporting patient safety and person centred care:
 - a. Education responses and upskilling to embed person centred care, proactively address any patient safety risks, awareness and impact of human factors.
 - b. Supporting career progression such as career advice, guidance and support for transition into employment and onward career development return to practice, developing specialty and associate specialist (SAS) doctors.
4. Enabling apprenticeships.
5. Promoting prevention and population health and well-being.

Mental Health Funding

- 4.23 JUCD STP Derbyshire has been successful in the application process to develop specialist perinatal mental health community services during 2018/19. The standard of proposals was high, it is anticipated that all successful STPs share their learning and best practice with regional and national colleagues via the perinatal mental health clinical networks.
- 4.24 The total funding allocated for 2018/19 will be £443,842.

- 4.25 The total agreed funding will be split into 2 equal payments. The first payment will be made in June 2018 in line with the usual payment schedule between NHS England and CCGs, however, plans are expected to be mobilised immediately in line with the funding agreement. From 2019/20 funding for specialist perinatal mental health community services will be allocated through clinical commissioning group (CCG) recurrent baseline budgets as set out in the implementation plan.

Communications

- 4.26 The new JUCD website is scheduled to go live on the 11th July which will replace the existing website. The current website was developed with no cost to the system thanks to Derby City Council communications team. Investment from NHS England has enabled the website update and will be more accessible to users.
- 4.27 A video is being produced to describe the Derbyshire case for change, setting the scene about the challenge the health and care system faces. Development has included input from a range of people including work-stream leads and Derbyshire wide communication and engagement leads. The purpose of the video is to support organisations share the message of what the system is aiming to achieve and will be used internally and externally. The video is to be completed in early July.

Moving Forward

- 4.28 In line with the national direction of travel Joined Up Care Derbyshire is expected to continue its progression into becoming an integrated care system (ICS).
- 4.29 In neighbouring parts of the country integrated care systems have already begun to progress.
- 4.30 NHS organisations, in partnership with local councils and others, take collective responsibility for managing resources, delivering national standards, and improving the health of the population they serve. Local services can provide better and more joined-up care for patients when different organisations work together in this way. For staff, improved collaboration can help to make it easier to work with colleagues from other organisations. And systems can better understand data about local people's health, allowing them to provide care that is tailored to individual needs.
- 4.31 By working alongside councils, and drawing on the expertise of others such as local charities and community groups, the NHS can help people to live healthier lives for longer, and to stay out of hospital when they do not need to be there. In return, integrated care system leaders gain greater freedoms to manage the operational and financial performance of services in their area.
- 4.32 In Derbyshire it is planned that an integrated care system will be in place by April 2019 – at least in shadow form. This will see organisations act together as a strategic commissioner - overseeing services, standards and how resources are allocated. Commissioning for local communities will take place through the place alliances. This should help ensure that services are equitable across Derby and Derbyshire but are able to be tailored to meet the needs of individual communities.

OTHER OPTIONS CONSIDERED

5.1 None.

This report has been approved by the following officers:

Legal officer Financial officer Human Resources officer Estates/Property officer Service Director(s) Other(s)	
For more information contact: Background papers: List of appendices:	Jenny Goodwin, Head of Communications and Engagement - Joined Up Care Derbyshire. jenny.goodwin2@nhs.net None Appendix 1 – Implications Appendix 2 - The Derbyshire model of care

IMPLICATIONS

Financial and Value for Money

- 1.1 One of the key purposes of the STP is to achieve a financially sustainable health and social care system for the people of Derbyshire.

Legal

- 2.1 The local NHS are required to have a STP in place for the Derbyshire footprint and have a responsibility to ensure appropriate involvement of the HWB.

The HWB has a duty to improve the health and wellbeing of its population and reducing health inequalities which is in line with the objectives and programmes set out in the Derbyshire STP.

Personnel

- 3.1 This paper has no workforce implications. Workforce planning, however, is a key element of the STP as a whole and the implementation of Place.

IT

- 4.1 The Local Digital Roadmap (LDR) and associated programme of projects will provide the IT infrastructure and developments required to support delivery of the STP. Responsibility for the LDR sits with the Derbyshire Informatics Delivery Board.

Equalities Impact

- 5.1 The STP sets out the local health and wellbeing gap – or health inequalities. A primary objective of the STP is to reduce health inequalities across Derby and Derbyshire.

Health and Safety

- 6.1 N/A

Environmental Sustainability

- 7.1 N/A

Property and Asset Management

- 8.1 The effective use of NHS estates and other assets is a workstream within the STP.

Risk Management and Safeguarding

- 9.1 There are currently significant risks to the delivery of health and social care within Derby and Derbyshire. The STP aims to minimise these risks and deliver a sustainable system. There are, however, significant challenges to its delivery and requires a fast pace of change which has some inherent risks. Management of these risks is incorporated within the established governance arrangements of the STP.

Corporate objectives and priorities for change

- 10.1 Delivery of the plans set out in the STP will support the corporate objectives of the organisations represented within the plan, including Derby City Council – most notably in relation to improving health and wellbeing.

Appendix 2 The Derbyshire model of care

