



THIS IS A Closed REPORT

Report to: Wroughtington, Wigan & Leigh NHS Foundation Trust Board
Date of Meeting(s): Wednesday 31st May
Board Representative: Richard Mundon

Report of: Healthier Wigan Partnership

Healthier Wigan Partnership Director

Contact Officer: Rebecca Murphy 07557 481711

Summary: *To update all partner organisations through their governance boards of the work being undertaken by the Healthier Wigan Partnership*

To seek agreement from each partner organisation to the shared commitments set out in Appendix 1

To share information on the work programme for the next 6 months.

Purpose of the Paper

The purpose of this paper is to update all partner organisations of the work being developed by the Healthier Wigan Partnership to establish integrated working arrangements in Wigan.

The report seeks agreement from each partner organisation to the shared commitments set out in Appendix 1 and provides information on the programme of work over the next 6 months to develop the Integrated Care Organisation arrangements.

Context

In January 2014, the Wigan economy signed up to a new shared vision for health and social care which will close a local financial gap of £87m over the next five years. The Wigan Locality Plan agrees:

1. That health and social care services should support people to be well and independent and to take control of their life
2. That health and social care services should be provided at home, in the community or in primary care, unless there is a good reason why this should not be the case
3. That all services in our borough should be safe and of a high quality and part of an integrated, sustainable system led by primary care

A key enabler to the delivery of this plan is the establishment of an Integrated Care Organisation (ICO) for Wigan. The ICO recognises that, in order to deliver truly effective and efficient out of hospital health and social care, providers need to work together as part of a new collaborative partnership which has clear and robust governance structures with the power and ability to reshape care delivery.

1. Progress

Good progress has been made so far in gaining commitment from partners to come together as an informal ICO Board to start to develop proposals and options for integrated arrangements.

The informal board has developed the following;

- Interim governance and membership arrangements for the HWP
- A vision and clear objectives
- HWP Branding
- A number of key Transformation Fund Phase 1 programmes to build the foundations for integrated working; for example Integrated Community Services, Start Well, Asset based Reablement and outpatient redesign
- New geographical arrangements that put GPs at the heart of the new care model.
- Key communications messages and stakeholder analysis
- The design of asset based training for NHS staff

- Initial proposals to identify services to sit within the ICO.
- Arrangements for the recruitment of a HWP Director and to recruit a ICO Establishment Programme core team.
- A timeline and programme of work to establish the ICO in Wigan

The next stage of work is to accelerate and strengthen these arrangements by introducing a formal Alliance agreement. As this is the case partner organisations are now asked to reconfirm their commitment by signing the 'Our Commitment' document at appendix 1.

It has been agreed that the ICO Board for Wigan will be known as the 'Healthier Wigan Partnership' (HWP) and branding has been developed to support this.

The board currently has terms of reference for how partners will work together in the early stages and how they will oversee the work to develop integrated care arrangements for Wigan. The board is chaired by David Fillingham, an independent chair from AQUA.

The Healthier Wigan Partnership includes Bridgewater Community Health Care NHS Trust, Wigan Council, Wrightington, Wigan and Leigh Foundation Trust, North West Boroughs Partnerships NHS Foundation Trust, Wigan Borough Clinical Commissioning Group and GP representatives.

The Board feeds into the established governance arrangements for the Wigan Locality Plan, reporting to Tactical Programme Board, Wigan Leaders and ultimately, the Health and Well Being Board.

2. Vision, aims and scope

The board has set out a clear vision as follows; *'The ICO will be a new alliance of providers working together to improve integrated and joined up services based around primary care, focused on prevention and early intervention, bound by a common narrative and approach, and with a stake for each organisation (including the local hospital) in the scaled reduction of demand'*

The board has agreed the following shared outcomes:

- Enable physical and emotional wellness, independence and reduced reliance on health and social care services
- Move resources to prevention and early intervention according to need and risk
- Deliver more coordinated, integrated and personalised care orientated around a community
- Provide health and social care services at home, in the community or in primary care, unless there is a more appropriate setting
- Support a sustainable health and care system
- Provide a quality care that is amongst the best in the country

By working collaboratively towards these outcomes the HWP will develop integrated and cross system solutions using a set of principles to redesign how services are currently delivered. These principles include:

- Reducing demand for public services by promoting independence and prevention
- Enabling health and social care integration wherever possible and appropriate

- Designing services around people and not organisations
- Identifying ways to incentivise providers to work together to meet the needs of the whole person
- Treating people close to their home and in the community for as long as it is appropriate and possible
- Reducing dependence on oversubscribed and expensive specialist resources such as emergency services, non-elective admissions, general practitioners and care homes
- Ensuring the quality and standards are met in the delivery of services from all providers
- Promoting independence and self-care
- Co-creating solutions with the community
- Reducing length of stay in hospitals, avoiding delay in discharge and prevents readmissions where possible
- Allowing system efficiencies to be realised
- Creating a climate for different professional backgrounds to work together in a positive, open and trusting climate
- Allowing every member of staff to be trained in having new conversations with residents that focus on assets rather than need
- Making full use of digital technology, including development of a joined up electronic record.
- Using of risk stratification & population segmentation
- Ensuring people receive the appropriate treatment at the right time

How will the Healthier Wigan Partnership deliver the outcomes?

The HWP will work towards these outcomes in two ways, one through the delivery of a range of programmes to introduce new models of care, integration and community based services and secondly, through the formation of an ICO.

A Transformation Fund Phase 1 Bid to GM was successful in December 2016, providing investment into a number of core programmes, within the Locality Plan, that are enabled and supported through the ICO development. This investment will accelerate the work to remodel the way services across the health and care system operate, with partners working together to deliver services at a more local level, including co-location, shared management of teams across partners, redesigning care pathways, such as outpatient pathways and developing GP clusters to put GPs at the heart of the new delivery model and connecting up services at a community level. The bid also included the roll out of an asset based approach, 'The Deal for Health and Well Being' to the wider health care economy, leading to a different conversation with residents about what they 'can do' to support their own health and wellbeing..

The following programmes will fall under the HWP.

- Structural Support for Establishment of ICO
- Primary Care Reform - New Models of Care - GP Clusters
- Integrated Community Services
- Children's Integrated New Delivery Model (Start Well)
- Outpatient Redesign

- Place-Based Public Service Reform
- Asset Based Reablement to Support Hospital Discharge
- Ambulatory Area Assessment Expansion
- Heart of Wigan - Phase 3
- The Deal for Health and Well Being

One of the main programmes from the Transformation Fund bid is for the 'Structural Establishment of the ICO', this programme will develop the future operating model and case for the ICO. There are a number of models emerging across the country for these types of arrangements on a wide spectrum from informal alliances to the creation of new organisations.

At this stage Wigan partners have the appetite to develop a more robust partnership arrangement, whereby collectively they would be able to deliver a whole population contract for services through an Alliance moving later to a partial MCP model. This would be in the form of a Multi-speciality Community Provider (MCP) or Local Care Organisation. This is a new type of integrated provider. It combines the delivery of primary care and community based health and care services, and a wider range of services such as social care, mental health and others.

The building blocks of an MCP are 'care hubs' of integrated teams, each servicing a community of £30-50,000 people. In Wigan the 'care hubs' are called 'Service Delivery Footprints' and GPs have formed cluster working arrangements within the footprints. This provides the focal point for a place based model of delivery, and builds on the place based approaches already successful in Wigan. The development of the Service Delivery Footprint arrangements are a key part of the Wigan ICO model.

Next steps

The HWP now needs to develop more formal arrangements and proposes to establish an Alliance, in the first instance. The nature and type of arrangement will need to be agreed through the governance arrangements of each partner organisation once developed. This will include the development of more formal governance, reporting, assurance and other associated activities.

Following the Transformation Fund approval the HWP Director is in the process of recruiting the initial resources to build the ICO Establishment Programme Team and support the development of the board. A high level roadmap of the work to do to develop the ICO is shown at Appendix 2.

Partners are now asked to reconfirm their support for this direction of travel, through their formal governance arrangements and sign up to the 'Our Commitment' statement, at Appendix 1.

Appendix 1

OUR COMMITMENT

Healthier Wigan Partnership

The Healthier Wigan Partnership comprises Bridgewater Community Healthcare NHS Foundation Trust, North West Boroughs Partnership NHS Foundation Trust, Wigan Council, Wigan GPs and Wrightington, Wigan and Leigh Foundation NHS Foundation Trust and Wigan Borough Clinical Commissioning Group

These organisations have come together to improve health and wellbeing services for local people. In doing so we are committed to:

- Improving outcomes for local people
- Joining up health and social care services, providing accessible high quality services to local people
- Developing new ways to prevent and better detect illness
- Reducing the levels of demand on hospital services and healthcare services generally
- Giving GPs a greater say in the planning and running of services

Our Commitment

We agree to the following principles in the development of integrated care arrangements in Wigan Borough:

1. We agree that an integrated system of health and social care is the best way to ensure optimum health and care outcomes for our population and to ensure collective financial sustainability.
2. We agree that the Wigan Locality Plan, 'Further Faster Towards 2020', setting out our vision to work together to reform health and social care services to improve the health outcomes of our residents and reduce health inequalities, as quickly as possible, provides the focus of our work together.
3. We agree the Healthier Wigan Partnership will provide a focal point for prevention and early intervention, proactively identifying potential future demand and shifting the focus from unplanned and reactive services to planned and targeted interventions.
4. We agree to put patients and residents at the heart of what we do.
5. We agree to put General Practice at the centre of our care model.

6. We agree to design and plan services around geographical footprints with populations of 30,000 to 50,000 based on registered patient lists.
7. We agree to design services for users and not our organisational needs.
8. The Commissioners agree to deliver a single approach to commissioning health and care services in order to transform services and improve outcomes. This will enable integrated working and include the development of pooled budgets.
9. We agree that we will consider the options available to us, and select the best legal delivery vehicle for the integrated care system in Wigan, but not withstanding this, we will continue to integrate our services on the ground, at pace, using the existing legal options available to us to do so.
10. We acknowledge that creating a Locality Care Organisation will not resolve the significant budget challenges facing all organisations but it goes some way to reducing it and it will be necessary to continue to work closely together with all stakeholders to manage the deficit around health and social care

Asset Based Approach

11. We agree wholeheartedly in an asset based approach to the design and delivery of our integrated services including:
 - a) A commitment that staff delivering services in Wigan will be trained and updated in having new conversations with residents that focus on assets rather than need.
 - b) Managerial arrangements within our organisations create the climate for staff from different professional backgrounds to work together in a positive, open and trusting climate
 - c) That people are supported to be in control of their own lives
 - d) That services are co-ordinated in a place, in a way, that is informed by a deep understanding of the community assets and capability in that place to support residents to be connected to their community and each other.
 - e) That service administration is organised in agreed geographical footprints, allowing alignment with key public service providers organised on the same footprint.
 - f) That the partnership encourages its workforce to be positive, courageous and accountable in the way they deliver their services to the public.
 - g) That our partnership embraces positive risk taking and permission based working, with the workforce liberated to demonstrate innovation and creativity on a daily basis.

Governance

12. We agree that in working together to reform health and social care services to improve health outcomes for residents, as quickly as possible, and enable system wide change to develop transparent, robust and inclusive governance structures.

13. The key principles of our governance arrangements will be:

- a) The objective of providing governance arrangements which aim to provide streamlined decision making; excellent co-ordination of services for the residents of Wigan; mutual co-operation; partnering arrangements, and added value to the way we deliver our services.
- b) An acknowledgement that the arrangement does not affect the sovereignty of any party and the exercise and accountability for their statutory functions.
- c) A commitment to open and transparent working and proper scrutiny and challenge of the work of the Healthier Wigan Partnership Board (HWPB) and any party to the joint working arrangements.
- d) A commitment to ensure that any decisions, proposals, actions whether agreed or considered at the Healthier Wigan Partnership Board carry with them an obligation for the representative at the (HWPB) to report these to their own constituent bodies, and seek agreement if required through the appropriate governance route.

14. We agree that the governance arrangements will be kept under regular review and be revised from time to time to reflect the changing status of the integrated care delivery vehicle.

15. We agree that any decision affecting the statutory duties of an organisation will be referred through that organisation's governing processes.

16. We agree to provide mutual assurance to the constituent bodies and that the minutes of the HWPB will be circulated to the Boards of the constituent bodies.

Resources

17. We agree to the formation of the HWP Team to manage the implementation of our work programme, part funded through GM Phase 1 Transformation Fund investment, and allocation of resources and expertise from partner organisations, as appropriate, to support our integration journey.

18. We agree to use the assets and resources available to us within our organisations, such as buildings, IM&T and other infrastructure to support the adoption and enablement of integrated working arrangements.

19. We agree to work together to transform our collective workforce to ensure we have the right skills, capabilities and resources to deliver sustainable integrated working arrangements across health and social care now and in the future.

OUR COMMITMENT

Signed by

April 2017

Bridgewater Community Healthcare NHS Foundation Trust _____

North West Boroughs Partnership NHS Foundation Trust _____

Wigan Council _____

Wigan GP Cluster _____

TABA GP Cluster _____

SWAN GP Cluster _____

LIGA GP Cluster _____

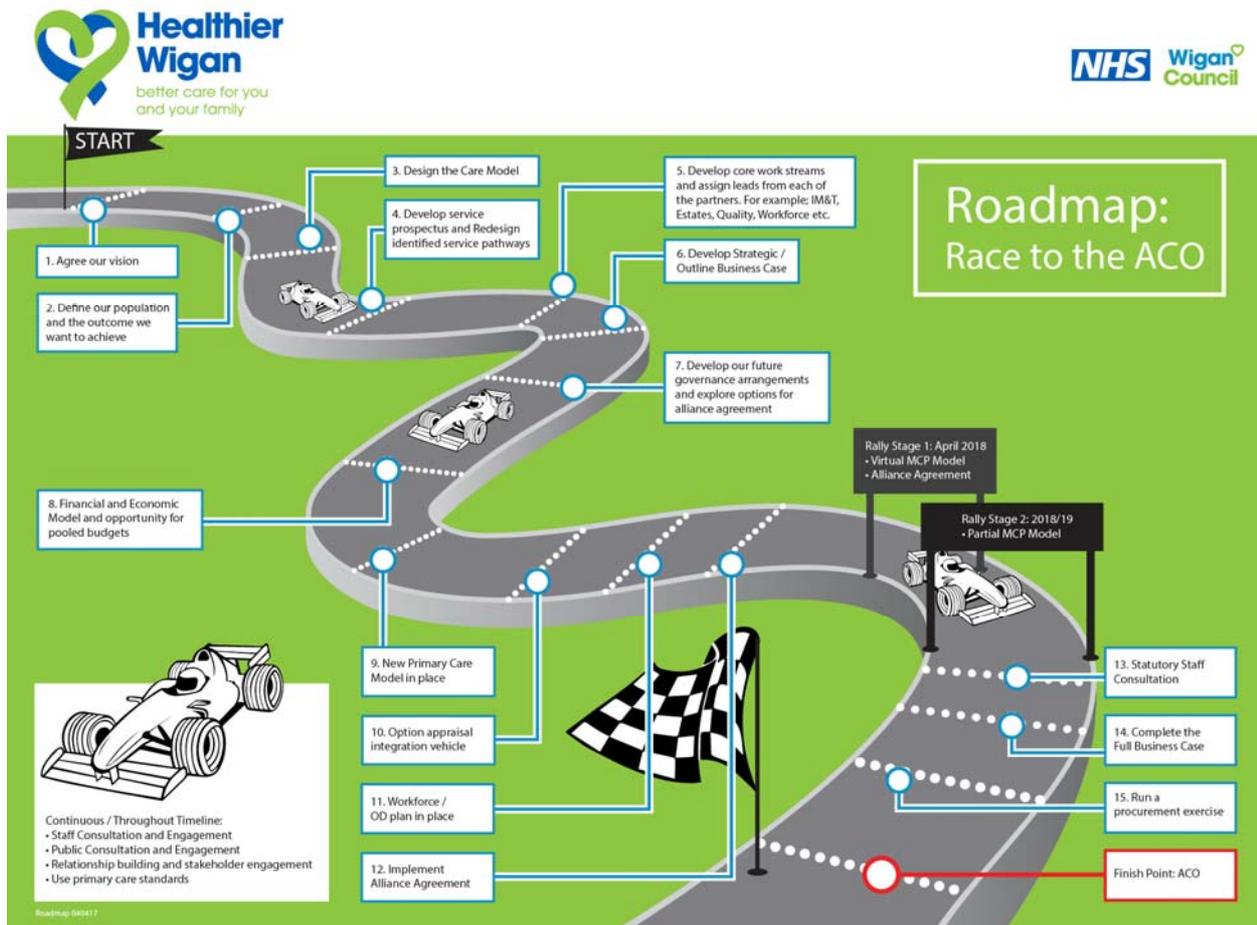
LEIGH GP Cluster _____

Wrightington, Wigan and Leigh NHS
Foundation Trust _____

Wigan Borough Clinical Commissioning Group _____

Appendix 2

ICO Establishment Time line



Roadmap considerations

The achievement of the high level plan roadmap will be underpinned by a number of factors:

- The ability to appoint the HWP core Establishment Team
- Availability of specialist expertise and resources from within partner organisations to support and develop the future proposals
- Options appraisal and consensus on a future operating arrangements for the integrated care organisation across providers, including hosting arrangements if appropriate.
- An agreed procurement timeline from the Joint Commissioning Executive
- The ability to develop a robust complex business case for approval by all partners
- Timely approvals through partner governance arrangements.
- The extent to which the agreed operational model requires the transfer of staff to a new or host organisation and meeting statutory requirements.
- Appropriate levels of patient and staff engagement.
- The ability to complete and fully assure NHS England/ NHS Improvement and GM that the commissioning processes and provider model are robust under ISAP