

HEALTH & WELLBEING BOARD

Subject Heading:

Integrated Care Partnership update

Board Lead:

Barbara Nicholls,
Director, Adult Social Care and Health

Report Author and contact details:

Keith Cheesman, Head of Integration
Keith.Cheesman@Havering.gov.uk
t. 01708 4337421

The subject matter of this report deals with the following themes of the Health and Wellbeing Strategy

- Theme 1: Primary prevention to promote and protect the health of the community and reduce health inequalities
- Theme 2: Working together to identify those at risk and intervene early to improve outcomes and reduce demand on more expensive services later on
- Theme 3: Provide the right health and social care/advice in the right place at the right time
- Theme 4: Quality of services and user experience

SUMMARY

The purpose of this report is to provide the Health and Wellbeing Board with a brief update on the progress being made through the Barking, Havering and Redbridge Integrated Care Partnership towards Locality working in Havering and the current activity to review Accountable Care System model of care.

RECOMMENDATIONS

1. To note the progress and to agree to receive further regular reports.

REPORT DETAIL

1 Integrated Care Partnership Board Review of Accountable Care

The Integrated Care Partnership Board has commissioned reviews of both the Provider aspect of Accountable Care and of the future for Joint Commissioning. The two reviews will be considered in parallel at the end of July.

These reviews build upon the work undertaken in 2016 which culminated in the submission of a Strategic Outline Case to NHS England, reported previously to this Board.

2 Havering Localities

Work is underway with partners across the Local Authority, NHS, local Pharmacies and Voluntary Sector to make changes to the way our local health and care services work together. We have been looking find the best ways of joining up services and are developing approaches built on the needs of local communities.

For our Children's services we will be take a preventive whole family approach to 'emotional health and wellbeing', with a 'key worker' assigned according to their case dependant on their individual needs, who can give them the support and information that they require, drawn from a team of professionals with a variety of specialisms. This will feel like a more seamless, easier to access, joined up service and will deliver better outcomes for our service users. It will aim to prevent the need for further, more intensive services later in life.

For our Adult services too, we are aiming to provide a more seamless 'virtual team' approach, again drawing the right support from a range of options, dependent upon need. This team, including GPs, therapists, carers and pharmacists, will support people to live independently on their own home, try to avoid unnecessary stays in hospital or visits to A&E. It will also help to get people home from hospital as quickly as possible and to get settled at home to recover more quickly.

2.1 Children and Families

Families would be identified by key stakeholders, across a targeted area, initially Gooshays and Heaton within 2-3 schools and the GP surgery. Any intervention should have measurable outcomes such as a change in negative behaviour patterns e.g. school attendance, behaviour issues and emotional concerns. The expected benefit will be to reduce referral to children's social care.

The key attributes of the pilot are:

- A whole family Approach



- Focus: 15-20 families who do not meet threshold but who, experience predicts, are those who will need support if we don't intervene (primary prevention)
- Using a multi-disciplinary approach
- Seamless and reliant on a "case holder" model, reduced handovers.
- Underpinned by a programme of joint training, thus creating consistency and resilience in the system

2.2 Adults

The Adults Locality model is centred on the Intermediate Care Tier, the suite of services from across NHS and local authority which seeks to provide up to six weeks of care and support to help people get back on their feet and to live independently following a hospital stay or a change in their physical ability through, perhaps through a fall or bout of illness.

Modelling and detailed design of a new Intermediate Care Tier begins in the next few weeks. It will draw together Reablement, Rehabilitation, Community Treatment Team, Voluntary Sector services and build a connected, single approach to support people in their own homes, to reduce unnecessary admissions to hospital and accelerate discharge if admission was necessary.

The Localities model develops this further to include links with the Council's Housing, Employment and Skills and Leisure teams, as well as GPs, Pharmacies and community groups.

IMPLICATIONS AND RISKS

Financial implications and risks:

Any significant decisions arising from this report have or will be subject to normal governance processes within the relevant organisation.

Legal implications and risks:

Any significant decisions arising from this report have or will be subject to normal governance processes within the relevant organisation.

Human Resources implications and risks:

Any significant decisions arising from this report have or will be subject to normal governance processes within the relevant organisation.

Equalities implications and risks:

Any significant decisions arising from this report have or will be subject to normal governance processes within the relevant organisation.



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BACKGROUND PAPERS

None