

**REPORT OF THE CHAIR OF THE ADULT SOCIAL CARE AND HEALTH
COMMITTEE****UPDATE ON PROGRESS WITH ARRANGEMENTS TO INTEGRATE HEALTH
AND SOCIAL CARE IN MID-NOTTINGHAMSHIRE****Purpose of the Report**

1. To provide Members with an update on arrangements to integrate health and social care in Mid-Nottinghamshire.
2. To revise the outside bodies list and review requirements for future progress reports.

Information and Advice

3. The Better Together Alliance (the Alliance) is a partnership between Ashfield and Mansfield Clinical Commissioning Group (CCG), Newark and Sherwood CCG, Nottinghamshire County Council, six NHS health providers and voluntary sector partners.
4. The Programme's ambition is that everybody who uses both health and social care services in Mid-Nottinghamshire will experience integrated care; services will work together better in order to give the best care based on a person's personal circumstances. In addition, it aims to put in place joined up, responsive urgent care services that operate outside of hospital wherever possible.
5. The programme has the following core workstreams:
 - Urgent and Proactive care (including care for people with long term conditions such as Diabetes, Chronic Heart Disease, Stroke)
 - Elective Care
 - Maternity and paediatric care.

Governance – the Alliance Leadership Board

6. On 11 November 2015, Policy Committee resolved that a quarterly report would be provided to the Committee on the work of the Better Together Alliance's 'Leadership Development Board'. At the same meeting, it was agreed that the Mid-Nottinghamshire Alliance Development Leadership Board would be added to the Council's Outside Body appointment list and that the Chair of the Adult Social Care and Health (ASCH) Committee and the Corporate Director, Adult Social Care, Health and Public Protection, would be appointed as members of the Alliance Leadership Development Board.

7. The Alliance Leadership Development Board was responsible for the development of a legally binding agreement to create the formal Alliance of all the Better Together partner organisations. This work has now been completed and approval was given by ASCH Committee on 7th March for the Council to become a Full Member of the Alliance.
8. As reported at the April meeting of Policy Committee, the Leadership Development Board has now changed to the 'Alliance Leadership Board' with a revised Terms of Reference whereby each organisation has one formal voting member only. The Corporate Director for Adult Social Care, Health and Public Protection (or his authorised senior officer delegate) is the voting Nottinghamshire County Council member on this Board. The Chair of the Adult Social Care and Health Committee attends in an advisory, non-voting capacity.
9. It is recommended that the outside bodies list is now revised to indicate that the Corporate Director for Adult Social Care, Health and Public Protection (or his authorised senior officer delegate) is the County Council's representative on the Mid-Nottinghamshire Alliance Leadership Board and the Service Director, Mid Nottinghamshire, is the representative on the Operational Oversight Group. In light of this change it is timely to also review the reporting requirements to this Committee, which is in addition to regular reports to the Adult Social Care and Health Committee.

Update report on key integration developments within Mid-Nottinghamshire

10. Progress to date with key integration projects in Mid-Nottinghamshire is as follows.
 - **Local Integrated Care Teams (LICTs)** are eight multi-agency teams who proactively identify and work with people in their local GP population who may be at risk of admission to hospital. The CCGs fund eight social workers that are co-located within the teams. The Council successfully bid for £20,000 from the Local Government Association Care and Health Improvement Programme to fund a robust external evaluation of the impact of the teams on the demand for social care. The procurement of this is underway.

The Council's START Re-ablement service supports people in their own homes for up to six weeks, in order to help them regain their independent living skills and confidence after a period of ill-health or hospital stay. The potential for benefits from the closer alignment of this service with the LICTs is also being tested.
 - **The Self-Care Hub** based at Ashfield Health and Wellbeing Centre commenced in July 2015. Its main objective is to help people better manage their health condition(s) themselves. Social Work and Occupational Therapy Clinics are due to start in the centre from July 2016. Social care are also involved in discussions to develop a new Primary Care Hub at the Ashfield Health and Wellbeing Centre.
 - **Transfer to Assess** schemes aim to avoid people being delayed in hospital any longer than necessary. Once people are medically well enough to move out of an acute ward, any further assessments required will be carried out in another setting, ideally their own home. This has had a positive impact on reducing the number of Delayed Transfers of Care from hospital. The aim is now to support the shift to a 'Home First' ethos which means reducing the current heavy reliance on the use of

short term CCG funded residential and nursing care beds as the place of assessment. Plans are being developed to make greater use of Mansfield Community Hospital and Newark Hospital for people who require further assessment, but are not yet able to go home. More community based specialist intermediate care support will also be provided so that more people can be supported in their own homes whilst further assessment is completed.

- **Call for Care** is a service that health staff can contact to identify available services that can be put in place quickly to avoid emergency admissions. The service is being rolled out in stages and Phase One started in November 2015 for the ambulance service and GPs. The plan is that Social Care staff will be able to call the service to help to find support in a crisis by Autumn 2016. The Council's Customer Service Centre and Adult Access Service are involved to ensure it is clear how urgent social care needs identified by Call for Care will be responded to.
- **A review of the multi-agency discharge teams and processes** will take place at King's Mill Hospital in July/August 2016. The aim is to provide people being discharged from hospital with a more integrated approach from the three separate health teams, the Hospital Social Work Team and Housing Officer currently involved in this work.

Progress with priority projects during the transition period of the Alliance

11. The report to the April meeting of Policy Committee explained that further work was needed to determine the detail of how to implement some of the intentions of the Alliance. To accommodate this, the Agreement established a transition period to 31 August 2017.
12. At the end of the transition period, if agreement on the way forward has not been reached, then there will be a decision as to whether the Alliance reconfigures its membership or is dissolved. There is also an option to extend the transition period (acting unanimously) to allow more time for resolution.
13. A transition plan and associated work-streams are now in place and include the following priorities:
 - **developing new payment mechanisms for health providers** that move away from the current system of 'Payment By Results' to allocating funding to providers to deliver outcomes that meet the health and wellbeing needs of local populations (also referred to as a "capitated payment mechanism"). It has been agreed that this will exclude funding allocated as social care Personal Budgets. Work is underway to develop this model.
 - **expand the outcomes based payment model for the NHS service contracts**, to allocate a portion of funding based on achievement of agreed outcomes rather than specific activity. For example, this approach could mean that providers receive money for helping people to successfully manage their diabetes, rather than just for how many people they treat for it. Seven outcomes have been selected to test the new approach in 2016/17, with health providers having a proportion of their funding linked to agreed actions. The outcomes are: reducing attendance at A&E, reducing permanent admissions to residential care; reducing falls; reducing the prevalence of diabetes; improving patient

experience in decision-making; reducing unplanned hospitalisation for chronic ambulatory conditions; and increasing the number of people able to die in their preferred place.

- **agreeing the detail of how the sharing of risks and rewards will operate** across the partnership. A draft process has been developed and is due to be tested using scenarios.
- **establishing Care Design Groups** that involve a wider range of stakeholders in developing options for service redesign. These groups are in the review and planning stage.
- **ongoing development of new models of care** as described in paragraph 10 of this report.
- **a process for selecting social care provider Alliance members** is scheduled to be taken for approval to Adult Social Care and Health Committee on 11th July 2016. The process has been informed by an event for social care providers, a follow up survey and discussion.

Progress with Sustainability and Transformation Plans (STPs)

14. The work of the Mid Notts Alliance forms part of Nottinghamshire's Sustainability and Transformation Plan (STP). As reported at the April 2016 meeting of Committee, NHS planning guidance issued in December 2015 set out a new approach to help to ensure that health and care services are planned by place rather than solely around individual institutions, over a period of five years, rather than just a single year. The design and delivery of STPs are central to this. The Nottinghamshire STP covers a planning footprint containing the geographic areas of Mid-Nottinghamshire, South Nottinghamshire and Nottingham City. Bassetlaw has been included in the South Yorkshire planning footprint for STP purposes but has Associate Membership status of the Nottinghamshire STP. A full presentation on progress with Nottinghamshire's STP was given to the Adult Social Care and Health Committee on 13th June 2016.
15. Nottinghamshire County Council's Corporate Director of Adult Social Care, Health and Public Protection is the Lead for the Nottinghamshire STP. A Programme Director has been appointed and supporting governance arrangements established including a Steering Group and Operational Oversight Group. Wider stakeholder workshops have been held to inform local analysis and planning on how to close the three main gaps identified as national priorities for STPs: Health and Wellbeing; Care and Quality; and Finance and Efficiency.
16. Work is on track to meet the national requirement to submit a first 'checkpoint' draft by 30th June 2016. This will be followed by an assurance visit from the NHS England team in July. The Council is awaiting confirmation of the date for submission of Nottinghamshire's final version, which will need to have been approved through each organisation's own governance processes.

Other Options Considered

17. No options are proposed as this is a report for information.

Reason/s for Recommendation/s

18. To provide a quarterly update as previously agreed by Policy Committee.

Statutory and Policy Implications

19. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

20. There are no financial implications arising directly from this report.

Implications for Service Users

21. The overall aim of the Better Together programme is to deliver improved health and social care outcomes for service users.

RECOMMENDATION/S

That the Committee:

- 1) notes the update on the development of integrated health and social care arrangements in Mid-Nottinghamshire
- 2) approves the recommended revision of the outside bodies list as set out at **paragraph 9** of this report and reviews future reporting requirements.

Councillor Muriel Weisz
Chair of Adult Social Care and Health Committee

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Constitutional Comments (LM 23/06/16)

22. The recommendations in the report fall within the Terms of Reference of the Policy Committee.

Financial Comments (KAS 21/06/16)

23. There are no financial implications contained within this report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- Integration with Health in Mid-Nottinghamshire – report to the Adult Social Care & Health Committee on 2 November 2015
- Appointment to Mid-Nottinghamshire Alliance Development Leadership Board – report to Policy Committee on 11 November 2015
- Integrating health and social care in Nottinghamshire – report to Policy Committee on 10 February 2016
- The Mid-Nottinghamshire “Better Together” Alliance Agreement contract – report to Adult Social Care and Health Committee on 7 March 2016
- Better Care Fund Plan 2016-17 – report to Health and Wellbeing Board on 6 April 2016
- Update on progress to integrate health and social care in Mid-Nottinghamshire – report to Policy Committee on 20 April 2016
- Selection process for social care providers to join the Mid-Nottinghamshire ‘Better Together’ Alliance – report to Adult Social Care & Health Committee on 11 July 2016.

Electoral Division(s) and Member(s) Affected

All.

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