

North East Lincolnshire Place Based Plan

Summary Plan for Health & Care Services

North East Lincolnshire Place Partners

North East Lincolnshire CCG

North East Lincolnshire Council

Northern Lincolnshire & Goole NHS Foundation Trust

Care Plus Group

NAViGo

Focus Independent Social Work Practice

Panacea Federation

Meridian Federation

Freshney Pelham Federation

Core Care Lincs

St Hughes Hospital

St Andrews Hospice

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1. VISION AND OBJECTIVES

North East Lincolnshire health and care community (Place) has an ambitious and innovative programme for place which is designed to provide the best possible services and achieve the best possible health, care and public sector outcomes for the borough.

Integral to the delivery of this program will be:

- the pioneering and developing partnership between the CCG and the Local Authority to create the union which will become the strategic commissioner for place
- the development of the joint working between all local providers who are coming together to create an Integrated Care Partnership (ICP)
- the developing partnership for more specialist provision through closer working between NL&G and Hull

Developing these 3 strands with the full engagement of key local providers, our communities and the commissioners will deliver a shared future which makes the best use of the public sector pound and creates a new reality for our local area.

We are seeking to achieve a stronger economy and stronger communities and to build North East Lincolnshire as an attractive place to live, work, visit and invest whilst tackling the inequalities and the wellbeing deficit prevalent in a number of communities in the borough.

Working at 'Place' there is an opportunity to develop a strategic approach to ongoing engagement with communities. It is our intention over the next few months to develop an integrated stakeholder engagement strategy so that people in North East Lincolnshire have meaningful opportunities to contribute to the planning and design of local services; and are confident that they are listened to and their views taken in account.

The diagram below gives the high level outline of our vision across North East Lincolnshire and the programme areas we will address to help us achieve this.



For the health and social care system the following aspects of the outcomes provide links to the important contribution the success of this transformation plan will have on the outcomes and the overall wellbeing of the people of NEL.

Outcome	<i>Selected narrative</i>	Link to Plan Objectives
Learning and Growing	<p><i>This should be a place where all people benefit from life-long learning and where regardless of age, people are fulfilling their potential in NEL. People and their carers are supported to develop skills and confidence in living with long term conditions.</i></p> <p><i>NEL must be a place where we enable children to have excellent school readiness</i></p>	<ul style="list-style-type: none"> • Improving the outcomes for those living with Long Term Conditions (LTCs)
Investing in our Future – Sustainable Communities	<p><i>We want North East Lincolnshire to be a place where people are supported to live independently and have access to the means to connect to other people and places.</i></p> <p><i>A place where residents and partner agencies are encouraged and empowered both individually and in partnership to help shape support and contribute to the communities in which they live, work and play. A place where communities support each other and engender a sense of community cohesion and civic pride.</i></p>	<ul style="list-style-type: none"> • Increasing the expertise and support in the community to reduce the need to attend hospital • Shifting population and workforce attitudes and culture to empower and support individuals to take control • Ensuring we are changing the way we use technology and digital services
Vitality and Health	<p><i>We want people to be informed, capable of living independent lives, self-supporting and resilient in maintaining/improving their own health. By feeling valued throughout their lives, people will be in control of their own wellbeing, have opportunities to be fulfilled and are able to actively engage in life in an environment that promotes health and protects people from avoidable harm.</i></p> <p><i>Access will be made available to safe quality services that:</i></p> <ul style="list-style-type: none"> • <i>prevent ill health,</i> 	<ul style="list-style-type: none"> • Improving outcomes for the population with a particular focus on <ul style="list-style-type: none"> ○ Mental health in line with the 5YFV for Mental health ○ Learning disabilities ○ Frailty ○ Cancer Services • Shaping the future of health and care services through enhanced partnership

	<ul style="list-style-type: none"> • support, maintain and restore people back to optimal health or • support them with dignity at end of life as close to home as safety allows: <p><i>Services that are part of an affordable innovative and quality health and social care system which directs resources according to need.</i></p>	<p>arrangements between the CCG and Council with a shared leadership team</p> <ul style="list-style-type: none"> • Integrating provision of services through providers working together in an Integrated Care Partnership moving towards the creation of an Integrated Care System <p>Implementing the GP Five Year Forward View and strengthening GP access</p>
<p>Economy and Strength</p>	<p><i>We want North East Lincolnshire to be a place where the local existing and emerging workforce actively participate in learning and employment levels are high.</i></p>	<ul style="list-style-type: none"> • Developing our workforce • Ensuring our estate is fit for purpose • Ensuring we are making the best use of the available resources (money, people and buildings)
<p>Safe and Secure</p>	<p><i>People can access services, when needed, that are safe and individuals and their families are confident in the quality and safety of care provided.</i></p> <p><i>Communities are supportive to and value children, vulnerable people and the elderly.</i></p> <p><i>All families live in good quality housing which is designed to meet a range of different needs, supporting people to be as independent as possible</i></p>	<ul style="list-style-type: none"> • Redesign the future provision of urgent and emergency care, with a particular focus on the delivery of urgent care in North East Lincolnshire • Ensuring that we have the right quality of service provision in place that is safe and effective • Achieving the national waiting time standards for referral to treatment times, cancer and A&E • Ensuring that we have the right leadership, systems and culture in place to oversee and assure the quality of services

2. PLACE CONTEXT

Because of North East Lincolnshire's geographical location it has a strong history of both innovation and collaboration. It has had to work collaboratively, both within NEL, but also with partners to the south, West and North to ensure that its population can access the services required, and because of NEL's demographic it has been forced to think innovatively in order to address issues and ensure its residents can continue to access services locally.

North East Lincolnshire (NEL) has been on a journey for a number of years and is able to demonstrate that through working in collaboration and partnership with others we are better placed to tackle the issues we face. There have been some notable successes:

- children's services being rated as good in the recent Ofsted inspection
- getting industry to recognise NEL as a place to invest which in turn creates a stronger economy
- our integrated mental health services were rated good overall and received an outstanding in relation to caring
- our integrated intermediate care service received an outstanding overall rating
- our GP practices have started to come together to form federations through which they will be able to deliver an extended range of services going forward.
- there are strong relationships between all key stakeholders across the Town.

However, there are a number of challenges for us to overcome:

- there are significant challenges with recruiting sufficient clinical and other professional staff to the area, including Consultant, GP, Nursing, Therapy, social work, and care staff
- performance against some of the key National Indicators, is below where we would wish them to be and gives rise to a concern about the overall quality and safety of services being delivered in some specialties locally.
- NL&G has a significant financial and quality challenge which can only be addressed by service transformation across the system, both locally and at an STP level.

Progress has been made, but we recognise there is still more to do and that this will take time.

The development of the ICP and the closer working between hospital trusts should both contribute significantly to addressing the challenges we face.

3. PLANS

3.1 Place based plan on a page

Strategic Developments	System Resources	Strategic Health and Care Priorities
Joint commissioning:	1. Workforce Develop innovative system wide roles & a place based recruitment pack that promotes place	Cancer Improvement in cancer treatment times Access to diagnostics
Acute services Undertake work required to support the Humber Acute services review	2. Digital technology and ICT ERS & Advice and guidance	Mental health Service improvement plans across the mental health arena
Integrated Care Partnership	3. Capital and estates Key strategic development of estates capacity across the system	Urgent and emergency care including managing winter
Union Closer working between the Local Authority and the CCG	4. Finance	Elective care including long term condition management
Quality: Establish the leadership systems and processes for oversight of quality	5. Population health management and analytics	Primary care Federation development to support at scale service delivery e.g. extended access
	6. Leadership & improvement development Develop leadership across place	Maternity / womens and Childrens Further work to deliver the Better Births agenda

3.2 Strategic Developments

3.2.1 Integrated Care Partnership

The providers and commissioners in NEL have agreed to come together to create an Integrated care partnership to address fragmentation in service delivery and ensure that services are built around patient and population need

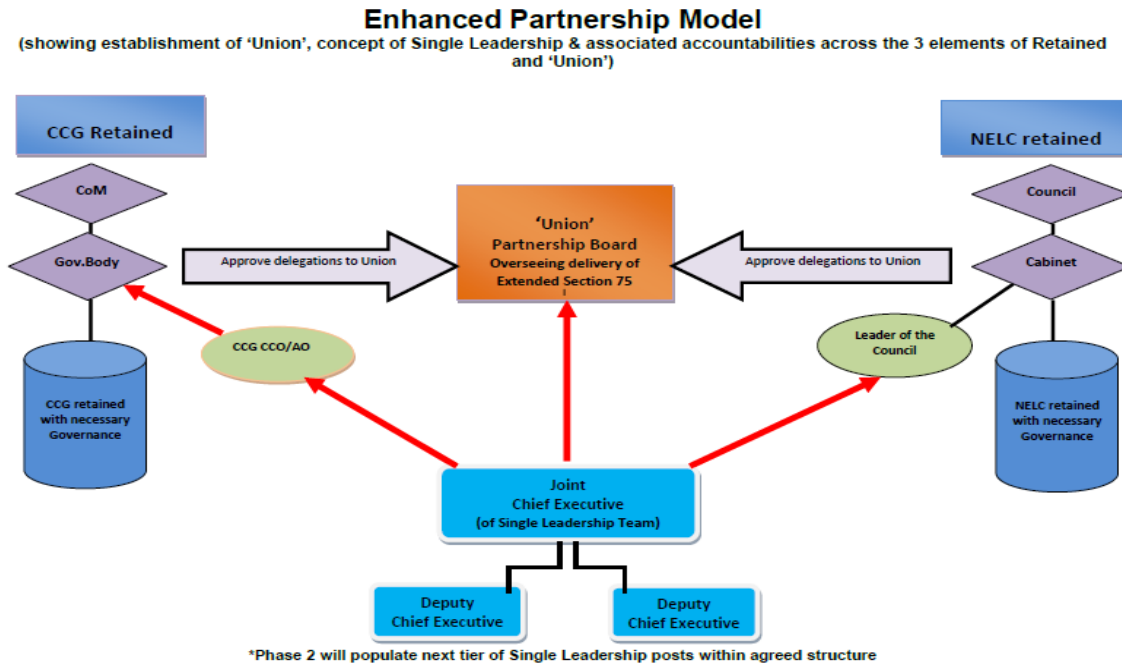
The following organisations have all agreed to be part of the Integrated care partnership and to working together to improve Health and care services for the NEL population.



3.2.2 Union

In June 2017 formal decisions were taken by NELCCG & NELC to enhance their existing partnership arrangements. Following considerations of 'a strategic case for change', both organisations had concluded that there were significant benefits to pursuing greater integration; not just in terms of positively affecting the shaping and delivery of health & care services, but also for the wider economic, community and well-being benefit for the local population.

Following organisation approvals to proceed with the enhanced partnership arrangements, governance and leadership arrangements were re-shaped with the appointment of a Joint Chief Executive and the formation of a new 'Union Board'. The high level governance architecture is shown in the graphic below:-



Underpinning these new arrangements is the formal Section 75 Agreement. It has been in place since 2007 but with the enhancement of the arrangements a refresh has been undertaken to ensure that it is 'fit for purpose' in terms of current, and is also capable of being extended to encompass future ambitions. The re-freshed Section 75 will be in place in July 2018; it will fully detail, support and enable an 'integrated commissioning approach'.

To support "the Union", a single leadership team to operate across the CCG and Council will be established in 2018/19, to further support joint working 2 organisations are currently exploring options to co-locate the 2 HQ's to enable teams to more fully integrate.

3.2.3 Quality

Quality is what matters most to people who use our health and care services and what motivates and unites everyone working in health and care. The NHS Five Year Forward View confirms a national commitment to high-quality, person-centred care for all and describes the changes that are needed to deliver a sustainable health and care system.

In NEL our health & social care services face the immense challenge of bringing about improvements in the quality of care at a time of growing financial and workload/workforce pressures. To enable us to meet this challenge we need a coherent, comprehensive, unifying and sustained commitment to quality improvement that is core to our place based plans which will be driven through our ICP. By quality improvement we mean designing and redesigning work processes and systems that deliver health and social care – however big or small - with better overall outcomes and lower cost, wherever this can be achieved.

Quality and finance are closely related through the many opportunities that exist to deliver better outcomes at lower cost and this has been demonstrated nationally (Kings Fund: Better Value in the NHS 2015). To ensure we engage staff in this quality improvement journey, we need to frame our approaches to financial improvement as a mission to deliver better value.

Improvements in the quality of care occur from the intentional actions of staff equipped with the skills needed to bring about changes in care, directly and constantly supported by leaders at all levels. They do not come free and will require a substantial and sustained commitment of time and resources which should be reflected within our plan. It needs to include redesign of training, budgeting processes and information systems and requires leadership and cultures that both understand and value quality improvement.

A much more consistent and coherent approach to quality improvement across “place” is needed that learns from both the successes and the false starts of the past. This approach needs to provide the resources and expertise that will enable “place” as a whole to become not only a learning “place” but also a high-performing “place”.

3.3 Strategic Health and Care priorities

Urgent and Emergency care / Winter Plan for 2018/19

In preparation for winter 2018/19, NEL has learnt from the experiences, successes and issues identified during winter 2017/18 and is starting to plans in place now that will help with both the management of winter, but will also support the longer term safety and

sustainability of the urgent and emergency care services. It has been agreed at the A&E delivery Board that the plan will be broken down into 4 phases which will align with the 4 quarters of the year, with the intention of having the majority of the schemes developed and implemented in time for winter. It has also been agreed that Introducing new schemes and ways of working when staff are at the optimum capacity with emergency care (during Quarter 4), should be avoided, therefore Quarter 4 activity will be about embedding and testing service resilience.



As before, the plan has been broken down into 3 areas:

- Pre-hospital / integrated Urgent Care
- In Hospital &
- Discharge and onward care

4. CONCLUSION

Public sector partners in North East Lincolnshire have a solid track record of working collaboratively for the benefit of local people and this summary plan sets out key the vision and mechanisms through which we will work collaboratively to achieve the best possible outcomes for our local residents. Further detailed plans will be worked up under each priority and objective and a clear monitoring mechanism is in place so that we can ensure our objectives are delivered.