

Transformation & Improvement Board 10 th June 2019	 TOWER HAMLETS
Report of: Denise Radley, Corporate Director of Health, Adults and Community Services	Classification: Unrestricted
Title Health and Social Care Integration – Tower Hamlets Together	

Lead Member	Councillor Amina Ali, Cabinet Member for Health and Wellbeing
Originating Officer(s)	Warwick Tomsett, Joint Director of Integrated Commissioning
Wards affected	All wards
Strategic Plan Priority / Outcome	Priority 1, Outcome 3: People access joined-up services when they need them and feel healthier and more independent

Executive Summary

This report illustrates the current context of health and social care integration and provides an overview of the progress made to date through the Tower Hamlets Together (THT) partnership. It introduces future next steps and opportunities for further health and social care integration within the borough.

Recommendations:

The Transformation & Improvement Board is recommended to:

1. Note the report and comment on the progress made to date and future opportunities regarding health and social care integration.
2. Comment on how the Transformation and Improvement Board can best support the ongoing work of health and social care integration.

1. REASONS FOR THE DECISIONS

- 1.1 The Transformation and Improvement Board are asked to comment on the report in order to influence how health and social care integration is delivered and communicated in future.

2. ALTERNATIVE OPTIONS

- 2.1 N/A

3. DETAILS OF THE REPORT

3.1 Context

Health and social care integration within Tower Hamlets should be viewed through the current context of:

- The Council becoming more outcomes focused, with a key strategic aim to ensure people access joined-up services when they need them and feel healthier and more independent
- Recognition that wider determinants of health include housing, environment, early years, community safety have an impact on general health and wellbeing
- The changing landscape of the NHS & NHS Long-Term Plan, including the emergence of multiple levels of planning, commissioning & delivery: 'neighbourhood' (localities); 'place' (borough); 'system' (3, 4, & 7 borough footprints) and the blurring of the commissioner/provider split. There is potential for yet further legislative changes

There are a number of challenges facing health and social care in Tower Hamlets, both health and financial related, which integration could help to address.

Particular health challenges include:

- Amongst the lowest life expectancy in the country
- Early deaths from major illnesses remain well above the national average
- Levels of common mental health issues are amongst the highest in the country
- 3rd highest proportion of the population live in the most deprived areas
- High levels of childhood obesity; less healthy adult diets; smoking and substance misuse; sexually transmitted infections; low uptake of screening
- High levels of insecure housing and overcrowding

Particular financial challenges include:

- Forecasting a £60m gap between the Council and CCG resources by 2021/22 – unless action is taken
- An increase in community based support (health and social care) will mean moving money around the system (acute to community)

3.2 Current system

Within the current system in North East London, there are 4 levels of integrated health and social care, these being:

1. *North East London*: Where East London Health and Care Partnership and North East London Commissioning Alliance set overall clinical strategy and link in with national and regional decision-making
2. *Multi-borough*: Where Inner North East London System Transformation Board hosts collaborative working between providers, strategic partnerships and oversees provision at scale

3. *Borough/place*: Where Tower Hamlets Together provides delivery of community based care, primary care at scale, out of hospital care, integrated care partnerships and JSNAs
4. *Neighbourhoods/localities*: Where locality teams and primary care networks function as the key delivery units

3.3 Tower Hamlets Together

At the borough level, Tower Hamlets Together is the primary vehicle through which integrated health and social care provision is being driven. It is a partnership that comprises the Council, Tower Hamlets CCG, Barts Health Trust, East London Foundation Trust, the GP Care Group and the Council for Voluntary Service.

Governance-wise, THT sits alongside the Joint Commissioning Executive and Alliance Board and reports up to the Health and Wellbeing Board.

THT works to achieve the following aims and uphold the following principles:

Aims:

1. Empower people to meet their own needs
2. Enable people to meet their own aspirations
3. Improve health, wellbeing and quality of life
4. Co-produce services and care with people who use them
5. Simplify the system, make it easier to understand and access
6. Ensure the right support, in the right place, at the right time – as close to home as possible
7. Be flexible and responsive to meet personal needs, wishes and outcomes
8. Deliver value for money, making best use of resources across the system
9. Develop self-supporting, thriving communities

Principles:

1. All money is public money and that all staff work for the benefit of Tower Hamlets residents
2. Every penny counts, and there is no duplication of services between different agencies
3. Services meet the identified needs of Tower Hamlets residents
4. THT will review and reorganise services and budgets where necessary to ensure that it achieves the maximum health and care improvements from its collective resources
5. Assume there is no new investment due to national policies – and budgets will reduce
6. Partnership working through THT is 'how we do business' in Tower Hamlets

Since its inception, THT has achieved the following:

Strategic achievements:

- Created a joint integrated commissioning team with a Joint Director
- Development of system-wide commissioning intentions and priorities

- Development of the THT Outcomes Framework and linked data
- Creation of Life Course work-streams to develop population health approach

Operational achievements:

- Restructured adult social care teams into 4 localities to align with community health services
- Developed a social care initial assessment team with strong links to health partners
- Pilot of jointly triaged short-term support, e.g. reablement
- Supported independence programme for people with LD, including Shared Lives
- Admission Avoidance & Discharge to Assess Service to support older patients to leave hospital quicker
- Multi-Disciplinary Rapid Response Team and Physician Response Unit to prevent A&E attendance
- Extended access primary care hubs
- A new rapid access integrated frailty assessment service
- A robust support service for Care Homes resulting in a reduction of A&E attendances
- Social prescribing roll out promoting self-care and prevention
- Established Locality Health & Wellbeing Committees bringing together local professionals

3.4 Next steps / opportunities

Going forward, there are future opportunities to further integration of health and social care in the borough, including the following to be implemented 2019-2021:

Strategic next steps / opportunities:

- Embed system-wide planning – commissioning intentions and priorities
- Development of system-wide financial planning and use of resources (estates, IT, workforce)
- Development of pooled/aligned budgets for improved outcomes
- Development of further integrated governance – bringing Council, CCG and provider decision-making together to jointly commission and deliver services

Operational next steps / opportunities:

- Transformation of how primary care is accessed and provided to a young, mobile population
- To improve outcomes for adults with common mental health issues such as depression and anxiety by strengthening what is currently provided
- To improve identification and management of those with respiratory issues by reviewing current services and understanding resident experience
- Strengthen the market development and management of nursing and care agency providers
- Increase and broaden access to mental health care for children and young people
- Support mothers and families to give their unborn babies the best start in life by connecting up services before pregnancy and beyond

- Make our health, care and accommodation support integrated and responsive to the needs of children who are Looked After
- Integrate therapeutic services across home, early years and school settings to improve school participation
- Embed a personalised model of care to include holistic person centred planning and the offer of a personal health budget
- Development of an integrated information and advice offer across health and social care and a joined up 'front door'
- All adults living with frailty receive a joined up approach to their care from all professionals and services who work with them
- Increase the range and availability in Borough opportunities and accommodation for people with LD

4. EQUALITIES IMPLICATIONS

4.1 There are no direct equalities implications arising from this report.

5. OTHER STATUTORY IMPLICATIONS

5.1 There are no direct statutory implications arising from this report.

6. COMMENTS OF THE CHIEF FINANCE OFFICER

6.1 This report provides the context and progress made to date with health and social care integration in Tower Hamlets, and the future challenges and opportunities to further develop integration. The opportunities presented have no direct financial implications at present; however as progress is made with developing these opportunities the financial implications will be fully considered. This will include any proposed changes to governance arrangements and the need to comply with the Council's Financial Regulations.

6.2 Work to review the opportunities for the pooling and alignment of budgets to support further integration of health and social care is continuing, and any proposals for this will follow the Council's governance processes. Due consideration will need to be given to the risk/gain share arrangements within a potential Section 75 agreement as part of this work, to ensure no unintended financial pressures for the Council are created through these arrangements.

7. COMMENTS OF LEGAL SERVICES

7.1 The Council operates Executive Arrangements for the purposes of decision making and Local Authority Law. The presentation with this report identifies one possible future structure for integrated governance and this structure is legally feasible within those arrangements.

- 7.2 The approach identified within the presentation is designed to improve the delivery of various services in terms of economy efficiency and effectiveness so such a structure is compliant with the Council's legal Best Value duty.
- 7.3 In the event that a new governance structure has been determined that requires changes to the Council's constitution then this will be subject to a further decision making process in line with the Council's constitution.
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Linked Reports, Appendices and Background Documents

Linked Report

- Health and Social Care Integration Presentation

Appendices

- NONE

Background Documents – Local Authorities (Executive Arrangements)(Access to Information)(England) Regulations 2012

- NONE

Officer contact details for documents:

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