Tower Hamlets Together

Vision, Outcomes, Governance

Presentation to the Health and Well Being Board

www.towerhamletstogether.com          #TH2GETHER
Introduction

Tower Hamlets health and care system share a vision, ambition and drive to become one of the best systems of interconnected health and care in the country. The Tower Hamlets Together vanguard has been a vital catalyst in driving forward this ambition. From joint planning, joint commissioning, and alignment of operational health and care teams in the community our plans involve working together to design services that address our local priorities, whilst at the same time working with wider planning footprints to ensure our system as a whole secures the best possible outcomes and maximum value for our collective investment.

We are developing a joint infrastructure, including a joint outcomes framework, fully aligned front-line stakeholder council, which encompass more co-location and the joint management of staff, as well as a shared focus on services for the whole course of life.

There is a commitment to an integrated health and care system as outlined in our Health and Wellbeing Strategy. The Tower Hamlets Together Partnership, underpinned by the new Alliance contract, will continue to develop and mature to deliver this commitment. Increasingly, integrated commissioning will strengthen the system leadership and focus on how best to deliver outcomes for local people in Tower Hamlets within a reducing cost envelope. We are clear that our integration partnership will remain focused on Tower Hamlets. We will work at tri-borough (WEL) and London-wide levels where this makes sense. Whilst not using the term ‘accountable care system’ locally, our Tower Hamlets Together partnership is in effect the accountable care model for our local area.

With this in mind we are working towards developing our end state vision which is challenged by a number of changes nationally and locally. Therefore there are a number of questions we are unable to answer at this stage. We will review the Operating Framework every three months in order to take account of these changes.

We are currently working out the arrangements that will be used to hold THT to account for improvements in health and care outcomes, as we transition to sustaining a structure post the vanguard programme.
Purpose of the Session

• To provide an overview of progress around our ‘integrated systems’ priority

• To update Health & Wellbeing Board members on the redesign of the governance arrangements within Tower Hamlets Together

• To consider and indicate support for a changed role of the HWB

• To think about the opportunities of the London devolution offer and the changes to CCG management and governance aligned to the East London Health & Care Partnership
Our Journey

The timeline below illustrates some of the developments, along with others for health and social care integration in Tower Hamlets.

2004-2006: Integrated care vision first widely articulated in borough

2009: Eight networks of GP practices formed across the borough, beginning starting to become legal structures in 2010

2012: WELC integrated care pioneer programme started

2013: Tower Hamlets Integrated Provider Partnership (THIPP) formed as part of pioneer programme

2014: Procurement of CHS contract linking community health with other services

2015 – 2018 THIPP/THT becomes new model of care Vanguard site

2017: Mobilisation of CHS Alliance with CCG, GPCG, EFLT & BH

2018: Recruitment of Joint Commissioning Director across LA and CCG

2006: Primary care access improved

2011: Barts Health start managing Community Health Services

2011: CCG formed as a membership organisation of the 36 GP surgeries

2014: Transforming Services Together (TST) established

2014: GP Care Group formed as federation of 36 practices

2015: Better Care Fund goes live

2016: STP developed for North-East London

2016: Launch of Joint Commissioning Executive

2018: Develop Integrated Commissioning Function
This diagram shows the layers of operating outside of Tower Hamlets. Currently there is uncertainty about what roles and functions will sit at the WEL and ELHCP level. A group has formed to look at what governance arrangements are required at the WEL level whilst the ELHCP is also taking form. Once these arrangements are developed THT will review the necessary connections required. THT partners are currently engaged in the WEL and ELHCP governance developments.
Our Vision and Values

Our Vision

We will work together in a partnership that delivers innovative, integrated and seamless care to people, their carers and families. Our care will be patient focused, coordinated and will make a real positive difference to the people who receive it.

Our Values

• We are focused on patient health and well-being.
• We are enabling and supportive.
• We always want to take a collaborative approach to deliver excellence in patient care and to solve the challenges we face.
• We aim to deliver only high quality care.
• We trust each other and our respective organisations.
• We are equal partners.
• We listen to each other and respect differences of views when they arise but still continue to work together.
• We are a compassionate partnership.
• We are open and honest with each other.
Delivering the best possible outcomes for Tower Hamlets

This is what we want our health and care system to look like:

1. **Person-centered care** with clear understanding and collaboration between residents and staff about what to expect from each other to make the right shared decisions based on individual needs.

2. **Health and social care services integrated around people**, with staff not hindered by organisational boundaries or bureaucracy in order to put people’s needs first.

3. **Transparent and clear information for patients and staff** to help them make effective and timely decisions.

4. **Joined-up working throughout Tower Hamlets** to drive improved wellbeing through partnerships outside of the health and social care system.

5. **Scarce resources have the greatest impact** by allocating them according to changing population need. Clear accountability between clinical decisions and resource allocation.

6. **A learning health and care system** – real time access to knowledge, digital capture of care experience, engaged empowered patients, incentives aligned for value, full transparency, a leadership instilled culture of learning, supportive system competencies.

Whole person mental, physical and social care

Making every contact count

Service users and carers are active and equal partners

Right care, right place, right time

Evidence based, safe and productive pathways

Delivering the best possible outcomes for Tower Hamlets
Our Emerging Outcomes Framework

After using Tower Hamlets Together services we want residents to be able to say...

<table>
<thead>
<tr>
<th>Around me</th>
</tr>
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<tbody>
<tr>
<td>I feel safe from harm in my community</td>
</tr>
<tr>
<td>I play an active part in my community</td>
</tr>
<tr>
<td>I am able to breathe cleaner air in the place where I live</td>
</tr>
<tr>
<td>I am able to support myself and my family financially</td>
</tr>
<tr>
<td>I am supported to make healthy choices</td>
</tr>
<tr>
<td>I am satisfied with my home and where I live</td>
</tr>
<tr>
<td>My children get the best possible start in life</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>My doctors, nurses, social workers and other staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am confident that those providing my care are competent, happy and kind</td>
</tr>
<tr>
<td>I am able to access the services I need, to a safe and high quality</td>
</tr>
<tr>
<td>I want to see money is being spent in the best way to deliver local services</td>
</tr>
<tr>
<td>I feel like services work together to provide me with good care</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Me</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is likely I will live a long, healthy life</td>
</tr>
<tr>
<td>I have a good level of happiness and wellbeing</td>
</tr>
<tr>
<td>Regardless of who I am, I am able to access care services for my physical and mental health</td>
</tr>
<tr>
<td>I have a positive experience of the services I use, overall</td>
</tr>
<tr>
<td>I am supported to live the life I want</td>
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More People Saying

• ‘I have easy access to information, advice and guidance which helps me to find what I need.’

• ‘It’s easy to get help from my GP practice and I can contact my Care Co-ordinator whenever I have any questions’

• ‘There are different people involved in supporting me but everyone listens to what I want and helps me to achieve my goals.’
HEALTH AND WELL BEING BOARD

Joint Commissioning Exec

Tower Hamlets Together Partnership Board

Stakeholder Council

CCG (SFIC) 

LBTH 

Systems leadership of an integrated system
A committee comprising the Joint Commissioning Executive & the Provider Alliance
Makes recommendations to the Joint Commissioning Executive on measures that need to be taken to manage system performance risk and deliver system outcomes framework
How do recommendations made by the THT Board relate to the process of contractual change and contract negotiation?
Challenges about how performance across the system is managed - shifting to all partners taking responsibility

Aligned commissioning decisions
Supports HWBB with key functions
Encodes system health & wellbeing outcomes into contracts
Manages outcomes based contracts
Currently carries substantive system performance risk (e.g. QIPP, PBR, BCF)
Takes into account THT Board recommendations on changes to contracts/commissioning. Risk that provider specific negotiations are for whatever reason not consistent with THT Board collective intent

Strategic & Transformation Programme boards. LIFE COURSE
These groups bring together commissioners, providers, services users and communities to coproduce transformational models of care to deliver outstanding outcomes. Chair of each is on THT board
Each population segment workstreams has shadow budget from all relevant partner service lines
Responsible for understanding improvement opportunities to deliver outcomes and manage system performance risk

STRATEGY & TRANSFORMATION

Healthy Adults PB – Living Well
Maternity & Children PB - Born Well & Growing Well
Complex Adults PB – Ageing Well

SYSTEM OPERATIONS & PERFORMANCE

Provider Alliance Board
Urgent Care Working Group
System Management Committee
Quality & Safety Committee

ENABLER PROGRAMMES

Workforce

Estates & IT

System Intelligence & Insight includes JSNA working group, shared health and care intelligence (BI) and outcomes

Payment & Contracting

OD & Training

NEIGHBOURHOOD / PLACE-BASED CO DESIGN

NW Health & Wellbeing Committee
SW Health & Wellbeing Committee
NE Health & Wellbeing Committee
SE Health & Wellbeing Committee

Tower Hamlets Together Operating Framework 2017-18

Approves JSNA
Approves H&W&WB Strategy – prioritizes wider determinants
Approves system health & wellbeing outcomes framework
Supports wider Tower Hamlets system alignment towards outcomes
Approves BCF

Stakeholder Council provides advice to the THT Board. Engine for learning. Does it also provide scrutiny? Is there a potential membership model?

CHS Alliance currently also includes the CCG. How does this work going forward?
Could the provider boards delegate any functions to the Alliance Board? Is there potential for the Alliance Board to be a committee in common?
There are a number of issues for providers that span CCG/ACS boundaries that need to be worked through.

Health & Wellbeing Committees - PLACE BASED Systems leadership of an integrated system at locality level. Discussion re locality vs network - again for iterative learning. Need to identify leadership teams for each of the locality H&W&WB Committees from across Alliance.
The local H&W&WB committees may well in the future have a tactical commissioning type role too.
Do the committees have ward counselor reps attached?
Next steps towards integration

By end of 2017/18

• Appoint Joint Director of Integrated Commissioning
• Develop an approach to integrated commissioning – an integrated commissioning service under the joint director
• Outcomes driven through three boards – born/growing well, living well, ageing well (implementation of agreed strategies)
• Continue to commission based on co-production and ensure this approach is embedded throughout the commissioning cycle

During 2018/19

• Restructure of adult social care services to locality model enabling greater alignment with primary and community health services
• Development of programmes and opportunities at ELHCP level (and other footprints where appropriate)
• Explore devolution opportunities

Questions for the HWB?

Are members of the HWB supportive of becoming the formal partnership overseeing Tower Hamlets Together?

How will the HWB best oversee both integrated commissioning and provision?

How will the HWB drive improvements to outcomes?

What opportunities may be available through tapping into the devolution opportunities as part of ELHCP?