

HEALTH AND WELLBEING BOARD			
Report Title	Integrated Adult Care Programme		
Contributors	Head of Strategy, Improvement and Partnerships, Community Services and Corporate Director, NHS Lewisham Clinical Commissioning Group	Item No. 7	
Class	Part 1	Date:19 November 2013	

1. Purpose

- 1.1 This report presents Members of the Health and Wellbeing Board with the Programme Initiation Document for the Integrated Adult Care Programme (Annex 1) and seeks agreement from them on the scope of the programme, the proposed deliverables and the arrangements to take this work forward.
- 1.2 The report also seeks agreement from Members to submit to NHS England the attached details on integration expenditure for 13/14 (Annex 2).
- 1.3 This report also informs Members of the outcome of the Pioneer bid.

2. Recommendations

- 2.1 Members of the Health and Wellbeing Board (H&WB) are recommended to:
 - Agree the Programme Initiation Document (Annex 1) which defines the programme, sets out the business case and outlines the project organisation and governance;
 - Agree the proposed workstreams and secure commitment from organisations represented on the Health and Wellbeing Board to engage with each workstream as and when necessary;
 - Note the proposed next steps to take this work forward;
 - Agree that the expenditure schedule (Annex 2) be submitted to NHS England; and
 - Note the unsuccessful outcome of the Pioneer bid.

3. Policy Context

- 3.1 The activity of the Health and Wellbeing Board is focused on delivering the strategic vision for Lewisham as established in *Shaping our Future – Lewisham’s Sustainable Community Strategy* and in Lewisham’s Health and Wellbeing Strategy.
- 3.2 The work of the Board directly contributes to *Shaping our Future’s* priority outcome which states that communities in Lewisham should be *Healthy, active and enjoyable - where people can actively participate in maintaining and improving their health and wellbeing.*
- 3.3 The Health and Social Care Act 2012 requires the Health and Wellbeing Board to encourage persons who arrange for the provision of any health or social services in the area to work in an integrated manner, for the purpose of advancing the health and wellbeing of the area. The timetable for the implementation of the Act is attached as Appendix A of the Integrated Care Programme PID.

4. Integrated Adult Care Programme

- 4.1 In response to the Government’s stated ambition to make joined up and coordinated health and social care the norm by 2018, Members of the Health and Wellbeing Board (HWB) agreed to increase the scale and pace of integrated working across health and social care in Lewisham.
- 4.2 The integrated care programme builds on the work undertaken to date which has focused on integrating services that support those with the most complex needs and, in particular, their access to health and social care services and their experience of admission into and out of the acute sector.
- 4.3 Building on this initial phase, the vision for integrated care, as articulated in the attached Programme Initiation Document (PID), see Annex 1, is for a population-based approach, covering all adults in Lewisham. It will include the frail and vulnerable, working age and older people, people with Long Term Conditions and /or mental health problems, people with learning disabilities, as well as the wider adult community. Although this programme’s focus is on the integration of adult services, it will align with the ongoing integration of children’s health, care and other services which are well established and being continually improved as set out in Lewisham’s Children and Young People’s Plan.
- 4.4 It is a whole system approach covering most services and activities for adults across the health and care sector, including Public Health and working with Housing. It will embrace the opportunities and flexibility that can be delivered through the voluntary, community and private

sectors. It will be aligned with universal services such as employment and leisure.

- 4.5 The PID provides more detail on the programme which seeks a step change in the way services are delivered, in patient experience and in performance and outcomes.

5. Next Steps

5.1 Development Stage:

- Officers will establish project leads and project groups for each of the proposed workstreams.
- Each project lead will ensure that where activity is already taking place, and where other groups exist, as part of the delivery of the Health and Wellbeing Strategy objectives this work is aligned under the appropriate workstream to avoid any duplication.
- The AIPB will identify critical dependencies to ensure that projects are prioritised appropriately.
- The AIPB will ensure that a robust evaluation framework is in place for the programme.
- A communications plan will be developed so that the aims and objectives of the integrated programme are well understood and so that all stakeholders can contribute to the development and delivery of the programme.

5.2 Planning and Implementation Stage:

- Each project group will develop its own workplan to achieve the agreed deliverables, ensuring the actions are co-produced with key stakeholders.
- Each project group will provide regular progress reports to the AIPB, the Health and Wellbeing Board and other key stakeholder boards.
- The workstream focussed on resources will undertake detailed financial modelling.
- Evaluation of completed projects will be used to inform the development of the programme.

6. Pioneer – Expression of Interest

- 6.1 In June 2013, Lewisham submitted an expression of interest in becoming a Pioneer in health and social care integration to the Department of Health. The National Partners informed the Council at the end of October that Lewisham's bid was not included in the final selection but stated that they hoped that Lewisham would continue to benefit in some way from the wider programme of support planned. Although unsuccessful, Lewisham has been invited to take part in a learning community for integrated care and support incorporating both

pioneers and other localities to capture and spread information, skills and ideas.

- 6.2 In providing feedback, the National Partners recognised the good work already underway, particularly in community development and the involvement of the voluntary sector, and cited the bid's strong preventive component. They also recognised the good governance that is in place for the programme. However Lewisham's plans for communicating its proposals for integration more widely did not come across strongly enough.

7. Funding to Support Integration

- 7.1 In May 2013, the Department of Health issued directions concerning the 13/14 transfer of funds to support integration from the NHS to local authorities. These funds must be used to support adult social care services which also have a health benefit. The use of the funding must be agreed with the CCG and approved by the Health and Wellbeing Board before being submitted for final approval by NHS England.
- 7.2 The amount for transfer from the NHS to the Council for 13/14 is £4.9m. Annex B of this report provides details on the expenditure that has taken place on integration in 13/14. This expenditure schedule has been agreed with the CCG. The £4.9m has primarily been allocated against expenditure on the integrated neighbourhood model and on enablement. Both these areas have been recognised by partners in Lewisham as having a positive effect on the whole system.
- 7.3 Subject to agreement by the Health and Wellbeing Board, it is proposed that the expenditure schedule is submitted to NHS England to enable the monies to be transferred.
- 7.4 In 14/15, additional monies are proposed for transfer from the CCGs to local authorities and Lewisham's total allocation is expected to be in the region of £5.9m (£1m more than 2013/14). More recently, in the spending round for 2015/16, the Government announced funding of £3.8 billion for health and social care through the Integration Transformation Fund (ITF). This overall amount takes into account monies already announced for 13/14 and 14/15. Again, the specific amount to be transferred to Lewisham for 15/16 has not yet been announced. A detailed plan for the use of Lewisham's 14/15 and 15/16 allocations has to be submitted to NHS England by 15 February 2014. Detailed discussions are currently taking place between the CCG and the Council and proposed areas of spend will be presented to the Health and Wellbeing Board for approval in January.

8. Financial Implications

- 8.1 There are no specific financial implications arising from this report. All current activity to progress the development of the programme will be

provided from existing resources within the CCG and the Council or from the funding that is to be transferred from the CCG to the Council. Until the individual workstreams are fully established and the individual project plans drawn up it is not possible to say precisely what additional programme management resources are needed. Any requests for such resources will be considered by the Adult Integrated Programme Board.

9. Legal Implications

- 9.1 As part of their statutory functions, Members are required to encourage persons who arrange for the provision of any health or social services in the area to work in an integrated manner, for the purpose of advancing the health and wellbeing of the area and to encourage persons who arrange for the provision of health-related services in its area to work closely with the Health and Wellbeing Board.

10. Crime and Disorder Implications

- 10.1 There are no specific crime and disorder implications arising from this report or its recommendations.

11. Equalities Implications

- 11.1 There are no specific equalities implications arising from this report or its recommendations. However, addressing health inequalities is a key element of the programme.

12. Environmental Implications

- 12.1 There are no specific environmental implications arising from this report or its recommendations.

13. Conclusion

- 13.1 Officers will take forward on the integration programme and establish as soon as possible the groups that will progress the individual workstreams. Further reports will be presented at appropriate intervals to the Health and Wellbeing Board.

If there are any queries on this report please contact **Sarah Wainer, Head of Strategy, Improvement and Partnerships** on 020 8314 9611 or **Susanna Masters, Corporate Director NHS Lewisham Clinical Commissioning Group** on 020 3049 3216.