

HEALTH AND WELLBEING BOARD		
Title	Devolution Pilot and One Public Estate Update	
Contributors	Executive Director for Community Services and Chief Officer, Lewisham Clinical Commissioning Group	Item 5
Class	Part 1	19 July 2016

1. Purpose

- 1.1 This report provides members of the Health and Wellbeing Board with a progress update on Lewisham's Devolution Pilot and the One Public Estate initiative (OPE).

2. Recommendations

- 2.1 The report outlines work undertaken in relation to Lewisham's devolution pilot and the relationship between the pilot and the One Public Estate initiative. Given the timing of the Health and Wellbeing Board meeting and the interdependencies between the devolution pilot and OPE, it has not been possible to submit a detailed business case. It is recommended that officers circulate the final business case to members outside the meeting and delegate approval to the Chair and Vice Chair.

3. Strategic Context

- 3.1 The Care Act places a legal duty on local authorities and organisations in the NHS to work collaboratively to improve health outcomes. Since 2010, Lewisham Council and the Clinical Commissioning Group have been working with our provider partners to develop integrated services for the population of Lewisham to improve health and care outcomes and reduce inequalities. The CCG has developed a Local Estates Strategy which will be considered by the Governing Body in September 2016.
- 3.2 Lewisham Health and Care Partners recognise that Lewisham's health and care system needs to change. The current system is not sustainable and we are not achieving the health and care outcomes we should. There are significant health inequalities in Lewisham; too many people live with ill health, high quality care is not consistently available and demand for care is increasing, both in numbers and complexity.
- 3.3 Lewisham is developing an integrated whole system model which fully integrates physical and mental health and social care delivered to the whole population. Health and care partners are focused on the redesign and reshaping of services to transform the way in which residents are encouraged and enabled to maintain and improve their own health and wellbeing, transforming the way in which local health

and care services are delivered within the borough, and transforming the way in which people access and are connected to the assets that are available within their own communities and neighbourhoods. The key strands of activity are focussed on prevention and early intervention, community based care delivered through Neighbourhood Care Networks and enhanced care and support. The devolution pilot will focus on the supporting enablers, specifically estates and workforce development that underpin the transformation of the whole system.

- 3.4 Lewisham Council became a signatory on Tuesday 15 December to a cross-London agreement, involving health organisations and local councils, that aims to transform services and improve health and wellbeing outcomes in London through new ways of working together and with the public. Parties to the agreement agreed that a small but essential part of this transformation is the devolution of functions, powers and resources from government and national bodies where that can assist, enable or accelerate improvements.
- 3.5 Lewisham is one of five devolution pilots being developed in London that aim to test the impact of devolving resources, decision-making and powers on accelerating transformation locally.

4. Developing the Business Case

- 4.1 A business case is being developed for each pilot, identifying the specific powers and resources for which devolution is sought. This is an iterative process and Lewisham's business case will initially focus on the use of estates to support the delivery of the whole system model of care. It will also include new approaches to workforce development.
- 4.2 Since submitting the expression of interest to be a devolution pilot, Lewisham has applied to the Cabinet Office and LGA's 'One Public Estate' (OPE) initiative. Notification was received in mid-June that Lewisham has been awarded £50,000 to develop the second stage bid to the OPE initiative. If the second stage bid is successful, Lewisham will secure up to £500,000 to support the delivery of the programme.
- 4.3 OPE is a pioneering initiative delivered in partnership by the Cabinet Office Government Property Unit and the Local Government Association. It provides practical and technical support and funding to councils to deliver ambitious property-focused programmes in collaboration with central government and other public sector partners. The programme has four core objectives:
 - Creating economic growth
 - More integrated, customer-focused services
 - Generating capital receipts
 - Reducing running costs
- 4.4 Lewisham's OPE submission outlined three interdependent schemes:
 - Regeneration – activity focussed on shared use of area specific sites that can deliver new homes, employment and fit for purpose assets.

- Collaboration – activity to enable the expansion of community based care services, new models of care at home and primary care development.
- Strategic Estate Planning – activity to maximise the use of existing facilities and co-location of services.

4.5 The detail of the devolution pilot business case in relation to the issues regarding estates will be identified through the OPE process. However, there are two key areas where devolution could provide more local accountability and enable the health and care partnership to better meet the needs of Lewisham residents:

- (a) Retention of capital receipts to enable reinvestment in local healthcare assets: at the minute, some capital receipts (including those from sale of NHS Property Services assets, plus non-FT trusts) cannot be retained by the local health economy for reinvestment – this investment is critical both for delivering a sustainable health economy (hence addressing any deficit that may exist) and for delivering best health outcomes to local people.
- (b) Regularisation of leases: the regularisation process that all the health estate providers are required to deliver on works in direct opposition to the development of flexible, fully utilised space, as it ties tenants into what are generally inefficient space utilisation. Estate providers therefore need to be able to work with tenants where appropriate to change leased, inflexible space into licensed, flexible space which a range of providers might be able to use across the entire week, including evenings and weekends.

4.6 The delivery of a strategic estates programme will enable new approaches to workforce development. The devolution asks relating to workforce development will also be informed by a detailed examination of the Buurtzorg approach. Officers from across the health and care partnership visited the Netherlands at the end of June to explore the potential of the Buurtzorg model. Having completed the visit, the detail in relation to this area will now be developed. A number of key areas have been identified that devolution could support:

- (a) Devolved powers may enable greater flexibility in relation to the development of new roles to work across the health and care system.
- (b) The STP highlights opportunities in relation to the consolidation of back office functions. Devolution may provide the flexibilities required to work across organisations.

5. Next Steps

5.1 The initial timetable required each pilot to submit the business case to the London Health Board by June 2016. It was planned that a draft business case would be presented to the Health and Wellbeing Board in July 2016 before being considered by the Healthier Communities

Select Committee, Mayor and Cabinet and the respective governing bodies of the health and care partnership. However, the timetable has since been revised in recognition of the need to align the business case with the Sustainability and Transformation Plan. The deadline for the initial devolution business case is now the 29th July 2016.

- 5.2 The London Health Board recognises that the development of the business case is an iterative process. The London Health Board has also acknowledged the interdependency between Lewisham's devolution bid and the OPE process. The deadline for submission to the second stage of the OPE initiative is also 29th July 2016.

6. Financial Implications

- 6.1 £50,000 was awarded to Lewisham Council to develop the second stage OPE submission. If the second stage submission is successful Lewisham will secure up to £500,000 to develop the business case. The financial implications will be considered as part of the development of the business case.

7. Legal implications

- 7.1 There are no specific legal implications from the work to develop the devolution pilot at this time. The legal implications will be considered as part of the development of the business case and the OPE submission.

8. Crime and Disorder Implications

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

9. Equalities Implications

- 9.1 There are no specific equalities implications arising from this report.

10. Environmental Implications

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

11. Conclusion

- 11.1 This paper has provided an overview of activity to develop the devolution pilot business case and the One Public Estate submission.

If there are any queries on this report please contact:
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