

Chorley Public Service Reform Executive

Tuesday, 19 January 2016

PRESENT:

Councillor Alistair Bradley (Chair) and Councillor Paul Leadbetter (Leader of the Opposition, Chorley Council), Gary Hall (Chief Executive, Chorley Council), John Buck (Group Manager, Lancashire Fire and Rescue Service), Sue Moore (Lancashire Care NHS Foundation Trust), Diane Gradwell (Trustee, VCFS Network), Jon Clegg (Lancashire Constabulary), Allan Jones (Business Advocate), Amanda Jakeman (Department for Work and Pensions), Chris Sinnott (Chorley Council), and Sarah James (Lancashire Teaching Hospital Trust).

APOLOGIES:

Rebecca Huddleston (Chorley Council), County Councillor Tony Martin (Lancashire County Council), Mel Ormesher (Lancashire County Council), Reverend Martin Cox (VCFS Network), Steve Winterson (Lancashire Care Foundation NHS Trust), Janet Hodgson (Runshaw College), Jayne Mellor (Chorley and South Ribble Clinical Commissioning Group), Dr Lindsay Dickinson (Primary Care Representative), and Andrea Trafford (GP Business Manager).

OBSERVER: Councillor Hasina Khan

OFFICERS: Vicky Willett and Hayley Hughes

1.WELCOME AND APOLOGIES FOR ABSENCE

Members were welcomed to the meeting by Councillor Alistair Bradley. Apologies were noted, and it was also noted that the meetings for the Executive in November and December 2015 were cancelled to allow work to be developed by the Implementation Group.

2.MINUTES AND MATTERS ARISING FROM EXECUTIVE MEETING ON 20TH OCTOBER 2015

Minutes were agreed as correct record with no matters arising.

3.IMPLEMENTATION GROUP UPDATE

Vicky Willett advised that since the last Executive meeting in October, the Implementation Group have completed a data capture exercise, agreed on a locality level, which was set at a Lower Super Output Area (LSOA), and agreed an area of focus as a starting point for testing new ways of working which is Chorley inner-East. Data has been collected and shared on this locality to develop a profile, and although there are some gaps in information which will continue to be worked on, a full set of proposals has been put to the Executive for consideration. The Implementation Group will take forward the work required by the proposal and develop an action plan. The group have also had a presentation from the Healthier Lancashire Programme on Digital Health which forms one aspect of wider transformation activity monitored and supported through the Implementation Group.

Members of the Executive confirmed that they were satisfied with the progress and work completed by the Implementation Group, and it was noted that the level of detail produced in the proposal was exceptional and what was needed to enable application at locality level. Assurance was provided that this is similar to other approaches being developed e.g. LCFT project in West Lancs.

4. PROPOSAL ON INTEGRATED LOCALITY

Vicky Willett presented the proposal to move services forward to meet the challenges set by the Public Service Reform Strategy, including the three year workplan, in particular in Year One looking at Integrated Services and perfect localities.

The paper gave context and challenges including demographic change, budgetary pressures, and policy change and reforms with considerations and decisions required from the Executive members.

A summary definition of a perfect locality has been developed to describe our collective intentions as: making communities more resilient, creating opportunities for improved outcomes, and a focused support from services.

Aims and objectives are set out to support the partnership in the pursuit of a perfect locality, embedding early interventions, sharing data and intelligence, supporting frontline services and developing community support.

Proposals are a collective understanding from the datasets gathered, of which a summary has been provided. This includes foundation activity as well as some quick wins which should be seen within a short timescale. Proposals impact all areas of the partnership, and will need a commitment and resources to support the outcomes stated.

The proposals will manage high cost cohorts, support vulnerable people, tackle wider determinants and produce a different way of working in the community. They are based around three themes which are:

- **Building community capacity** – will include a commission for an organisation to cover community potential, identify gaps and assets with proposals for campaign
- **Establishing the single front line** – using collective resources develop consistent and improved referral pathways, embed the Lancashire Wellbeing Worker service, testbed joint interventions including standard question sets, and utilising digital opportunities
- **Enhanced multi-discipline approaches** – using principles of Integrated Action Team, develop testbed in locality, including primary care through a possible local management group, looking at earlier interventions, scalability and risk stratification.

Proposals are expected to be delivered within 3-6 months, with results and evaluation being provided around the six month stage. The Executive had assurance that any work done in a specific area will look to be focused in the locality, to test principles and approaches with a view to be scaled up as part of the evaluation process and next phases of work. Using the LSOA as a test bed area seemed reasonable given the population is around 1700 residents.

The report also covers the wider transformation agenda, and it was agreed to have further detail on how the programme fits from a district and county level perspective at the next meeting.

The outcomes stated are aspirational and will be challenging. Measures will be in place and the Executive supported the need to be able to show improvements to focus activity, but be flexible enough to understand if the target proposed is not at the right level.

Financial benefits will focus on the high cost cohort, and it was noted that savings on measures relating to wider determinants may take longer to achieve. Review of cost savings will form part of the evaluation process.

Resources and capacity to deliver the proposals will need to have the authority from the Executive, and approval to actively engage with staff to re-shape relevant areas was also being sought.

Funding from the Transformation Challenge Award (TCA) has been secured to support specific proposals, and the Executive are the accountable body to manage local delivery as part of a wider programme. Any extended or additional work would need to be funded through the partnership, although this is mainly considered to be resource and capacity at this stage.

Comments were invited from the Executive members, which are summarised:

- Need to understand timescales against the proposals, ensuring that work proposed is realistically deliverable;
- Engagement and awareness of the work to front line worker now to be developed;
- Involvement of the voluntary sector is key to understanding how services fit with the work done in the community;
- Opportunities to in-reach specialists to support community delivery and potential locality based test bed;
- Referral routes are part of this activity in terms of ensuring best direct route to support, and manage at first point of contact to reduce “referral fatigue” i.e. levels of signposting, as well as an understanding of how support is escalated/de-escalated;
- Extend the partnership to other areas such as public houses and gambling establishments to understand root causes, develop social responsibility and access to support networks;
- Consider who in organisations should be linked into the Implementation Group to deliver the next stage and ensure alignment with organisational business plans; the hospital will be supplementing activity with relevant managers and clinical directors.
- As part of measures to make sure prevention and early help are delivered as well as reducing pressures from high end services i.e. helping prevent people being admitted to hospital as well as supporting people leaving;
- Overall the report was clear and concise, and is flexible to complement and support wider transformation programmes;
- It was acknowledged that there are similar projects Executive members are involved in which helps to validate the approach. Jon Clegg advised that the Police are involved in two similar projects which involve LCC and Ribblesdale East, and Transforming Lives in East Lancs. Vicky confirmed that we are linked into Transforming Lives to share findings from both areas;
- Outcomes are challenging, and as part of developing the measures consider phased approach; and
- As part of the cost savings, and impacts on areas, it was noted about funding streams from other areas, in particular VCFS organisations.

Discussion included the potential risk of capacity and funding issues against activity in work programme, as testbeds may reduce impacts in some areas, and potentially reduce payments, but create capacity demand elsewhere which are not funded. This is mainly due to how services are currently commissioned. Work on building community capacity is in the work programme, and initiatives will be monitored and measured as activity takes place. A risk has been raised to capture this issue.

Executive members approved the outline proposals, and gave commitment to:

- Trial new ways of working;
- Obtain wider organisational sign up and engagement;
- Authorise and support the redistribution and allocation of resources to support locality based working;
- Influencing and challenging where necessary to overcome barriers to data sharing

Next Steps

The Implementation Group was tasked with developing a more detailed action plan to operationalise proposals including assuming lead responsibility for aspects of the programme, which will be confirmed at the Executive in February, including quick win elements of the programme.

An evaluation will be completed and brought back to the Executive after six months

5.DEVELOPING SUSTAINABLE PUBLIC SERVICES: INTEGRATED COMMUNITY WELLBEING SERVICE FOR CHORLEY

Sue Moore provided background to the report, which has been borne out of the need to work together across services to manage the less acute end of the spectrum of need, with the focus of being customer centric, and looking at areas of low level interventions, and reducing bureaucracy residents are facing.

The proposal is modelled over a longer period of time, compared to the previous proposal discussed, and will look to manage public health services and rebuild society at a practical and organisational level. An example of hoarding was given where someone may not reach the threshold of low level mental health, but still need emotional support as well as practical support from a number of areas, who equally can only intervene if there are environmental health issues.

The proposal is flexible to enable partners to be engaged when they are ready, and will start off with Chorley Council and Lancashire Care Foundation Trust.

Chris Sinnott advised the group that the work had been supported by the findings from the Chorley Commission, and covers the principles of the Public Service Reform Partnership, and both proposals will complement each other in terms of cohorts and timings. The longer term work will shift how organisations are built, and through the strategic and economic case will look to take 10% savings out of the system over a ten year period.

Detailed proposals have been agreed at the full Council in November, and the next steps will involve discussions with all partners from the Executive about the level of involvement and how to shape the work going forward.

Comments were invited from the Executive members. Sarah James welcomed the conversations being planned, and agreed that this links with wider transformation programmes, and that both proposals discussed today are clearly set at a different pace. John Buck noted that this work gives a clear expectation of what is important to Chorley.

Gary Hall advised the group that there are council proposals going forward to restructure the organisation which should enable reforms to be embedded and focus on early intervention as a key priority. Sue Moore also advised that LCFT were also going through re-structure to support community wellbeing with a locality focus.

Councillor Bradley advised that the Lancashire Combined Authority work, which involves 15 authorities, have agreed five work strands, which includes one on Public Service Reform, and with the two proposals delivered today, that these fit with the Lancashire view, and set Chorley in a good place to enable work to be completed at pace. An update on this work will be provided at the next meeting.

6.ANY OTHER BUSINESS

It was noted that the areas not represented should be made aware of the proposals and seek commitment to these.

Sue Moore advised that the NHS Planning Guidance is explicit on locality, and work is being done with the Service Transformation plans for locality. Gary Hall mentioned he has contacted LCC regarding aligning localities in relation to the public health budget. Sarah James advised that the work of the Implementation Group fits with the LTHTR sustainability and transformation plan. Chris Sinnott advised that a paper regarding the impacts of proposals on the spatial levels involved would come to the next meeting, as previously stated.

7.DATE OF NEXT MEETING

Date of next meeting will be on 16th February 2016 at 4pm, at Chorley Town Hall.