# Chorley Public Service Reform Executive

13 May 2016

You are invited to attend a meeting of the Chorley Public Services Reform Executive to be held in Committee Room 1, Town Hall, Chorley on <u>Tuesday</u>, 17th May 2016 commencing at 4.00 pm.

I hope you will be able to attend the meeting for which an agenda is set out below.

### **AGENDA**

- 1 Welcome and apologies for absence
- 2 <u>Minutes and Matters arising from Executive meeting on 15th March 2016</u> (Pages 3 8)
- 3 <u>Implementation Group Update</u> (Pages 9 26)
  - Programme Update
  - Communications and Engagement Plan
- 4 Chorley Public Service Reform Board Discussion Paper (Pages 27 28)
- 5 LCC Asset Review (Pages 29 32)
- 6 Sustainability and Transformation Plan Update
- 7 Any other business
- 8 Date of next meeting

Next meeting 19<sup>th</sup> July 2016 at 16.00, Chorley Town Hall

Meeting Contact:

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### Distribution

All members and officers of the Chorley Public Services Reform Executive.



# Chorley Public Service Reform Executive

### Tuesday, 15 March 2016

### PRESENT:

Councillor Alistair Bradley (Chair), Councillor Paul Leadbetter (Leader of the Opposition, Chorley Council), Gary Hall (Chief Executive, Chorley Council), Rebecca Huddleston (Chorley Council), John Buck (Group Manager, Lancashire Fire and Rescue Service), Carole Spencer (Strategy and Development Manager, Lancashire Teaching Hospitals NHS Trust), Steve Winterson (Lancashire Care NHS Foundation Trust), Mel Ormesher (Lancashire County Council), Diane Gradwell (Trustee, VCFS Network), Karen Sharrocks (Chorley and South Ribble Clinical Commissioning Group), and Amanda Jakeman (Department for Work and Pensions).

### **APOLOGIES:**

Jon Clegg (Lancashire Constabulary), Sue Moore (Lancashire Care Foundation NHS Trust), Allan Jones (Business Advocate), County Councillor Tony Martin (Lancashire County Council), Janet Hodgson (Runshaw College) Dr Lindsay Dickinson (Primary Care Representative), Andrea Trafford (GP Business Manager), Carole Lee (VCFS Network) and Gill Dalton (Department for Work and Pensions).

**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, introductions made and apologies noted.

### 2. MINUTES AND MATTERS ARISING FROM EXECUTIVE MEETING ON 16TH FEBRUARY

Minutes were agreed as correct record with no matters arising.

Actions from previous meeting noted as:

- All Executive members to have a discussion with relevant Implementation Group representative on their capacity to deliver the elements of the work programme. The commitment to deliver work needs to be confirmed before the next Executive meeting in March to the PMO. Cleared, communications to be open to ensure support on capacity, direction and decision making.
- Executive Members to consider work planned, confirm representatives from each organisation, in particular confirming proposed leads. Cleared, leads in place.
- For the PMO to ensure regular updates on the Sustainability and Transformation Plan (part of Agenda), Lancashire Combined Authority and Central Lancashire Health and Wellbeing Partnership are provided. Cleared, planned into Executive Forward Look.
- Steve Winterson to ensure that the Implementation Group remains fit for purpose and provides regular updates on progression of activity. Cleared, planned as part of the discussion at the IG group meeting in April.
- Executive Members to provide an honest self-assessment of where the collective partnership is at currently in terms of Leadership. Scores to the PMO ahead of the next meeting. Cleared, part of Agenda item 5

### 3. IMPLEMENTATION GROUP AND PROGRAMME UPDATE

Steve Winterson advised that following the Implementation Group in February, three pieces of work are now underway. Due to the work involved in these areas a decision was made to cancel the Implementation Group meeting on Tuesday 1<sup>st</sup> March. An update was provided to the Implementation Group on progress, and members have been involved in progressing the work required.

Hayley Hughes provided an update on two areas of work, which included the Task Group for Partnership Connectivity and a test of an Extended MDT.

### Partnership Connectivity

The task group met for the first time on 3<sup>rd</sup> March, with a good representation from services operating in the locality of Chorley inner-East, with a wealth of experience across the group in both the locality and in services provided.

The group considered how to improve connections across organisations to establish a more consistent frontline approach and raise awareness of support available to residents with a view to improving health and wellbeing outcomes through preventative help and early interventions. It is within the remit of the group to be creative in testing different approaches in delivering services.

In the context of the locality of Chorley inner-East, the group considered current organizational activity; how we could start to work differently as partners in this area as part of a more joined up approach; and what mechanisms could be utilized to engage more effectively.

Outcomes from the group included confirmation of key areas of focus (elderly, families with complex needs, carers, and ethnic minority groups); understanding of media available to support awareness and improve connections across services; suggestions of possible activities, including befriending; wider engagement, improvements to referrals.

The group will meet again to define a plan of activity on 16<sup>th</sup> March.

### Extended Multi- Disciplinary Team (MDT)

This work stream is to look at how we can more effectively share information and put in place interventions to support individuals placing highest demand on the system, identified from a primary care point of view, as part of early intervention and prevention.

From an initial discussion with the Chorley Surgery, Chorley Council and Police based on a cross section on anonymised cases causing the GP concern, it was established that:

- The co-hort of patients could be expanded to cover a wider range of vulnerable adults causing concern; and
- The co-hort of patients could have support from a wider network of partners to give early help, subject to relevant consent being provided.

Plans to deliver the wider remit of the MDT are in progression, and will include the consideration of additional GP practices, and support to administer the group. Findings from the group will be reported back to the next Executive

### 4. PROCUREMENT UPDATE

Vicky Willett provided an update on the third area of work under the Implementation Group, which is on Building Community Capacity. There are four elements in development which are:

<u>Community Capacity and Engagement</u> – will be an intensive programme to increase community resilience by facilitating behaviour change towards residents helping themselves and others. To incorporate community engagement and a smaller community conversation

### Agenda Page 5 Agenda Item 2

in Chorley inner-East. Contract length six months. Procurement due out for tender in next couple of weeks, with start date of 1<sup>st</sup> May.

<u>Co-ordination and Intelligence</u> – will involve\_Multi agency coordination, data gathering, analysis and initial assessment of existing befriending provision. This will act as a single point of contact and cover front line, and support activity including analysis, very much a short term role to produce momentum in gathering intelligence required to support wider work.

<u>Community Co-production</u> – will involve actions to assess, model and develop options for community coproduction. This will be progressed slightly later in the timeline, as it will be informed by outcomes of Community Capacity and Engagement.

<u>Community Befriending</u> – To support service development, infrastructure, including ICT, and promotion based on the needs identified from the initial assessment as part of the coordination role.

A set of outcomes and outputs expected from the procurement on Community Capacity were noted, including increasing community resilience, engagement with residents/partners and businesses.

The board supported the approach on the procurement activity, with the consideration of including harder measures to understand system change through the activity. This could include access to Lancashire Wellbeing Service, reduction of admissions, which are part of a number of aspirational deliverables in the Public Service Reform Programme.

### 5. SELF ASSESSMENT POSITION NOTE

Following the recommendation of the Executive at the meeting in February, all members of both the Executive and Implementation Group were asked to complete a simple leadership assessment questionnaire based on a framework developed to establish a benchmark position.

Ten completed responses have been received representing the majority of partner organisations, although not consistently across both groups (4 responses from the Executive and 6 from the Implementation Group).

The scoring was based on a range of levels from Commitment (1) to Sustainable Delivery (5). These have been applied to eight domains. The average score was 2, and it was noted that the results from the Implementation Group were slightly higher than the Executive.

This was seen as a realistic assessment against the new structure of the Public Service Reform Partnership, and programme which have been in place since September 2015. The exercise gives a good position marker, and some indicators of what to progress to.

The Executive agreed to the next steps and recommendations set out:

- All members of the Executive to complete the assessment to ensure a consistent understanding and then a final summary report completed
- Areas for development to be identified by the Executive along with any further action for the programme office to consider
- The assessment to be undertaken again in 6 months time with the aim of achieving improvement in the current scoring.

Key points from discussion included:

 That further learning from testbed activity will form how we adapt our organisations, and deliver a natural progression through the stages in the framework.

- Although this will mainly be an organic process, a plan of delivery to the next stages would be useful.
- By it's nature, self-assessment tends to score lower 360 degree appraisal may be an alternative way of making an assessment.
- Need to look at increasing understanding from within each organisation, partners and residents on what we are trying to achieve in Public Service Reform, by having something tangible to share and easily understand.
- Good time to reiterate consumption of purpose, including understanding of ambition of partnership, three year plan, activity being measured and outcomes expected.

Action: PMO to request assessments from relevant areas; propose activity to move to next stages, against work programme development; and develop core information that could be shared with services to support better understanding.

### 6. SUSTAINABILITY AND TRANSFORMATION PLAN UPDATE

Gary Hall advised that the Health Sector are required to produce a Sustainability and Transformation plan, to support the NHS Five Year Plan. The Sustainability and Transformation plan has key objectives of improvements to health outcomes and supporting gaps in budgets through significant transformation, which will include a drive to deliver prevention and early intervention.

There will be a Lancashire plan, with five local delivery plans for each health economy. Gary Hall as Chair of the Health and Wellbeing Partnership, and Karen Sharrocks as the SRO are tasked with producing the local delivery plan for Central Lancashire. Guidance from Lancashire level is needed to support this work, and the first draft is expected by the end of April. Healthier Lancashire will pull the local delivery plans together, which will need to refer to cross cutting Lancashire wide themes including Care Homes, hospital configuration and specialised services.

It was noted by the Executive that the plans being developed cut across much of the activity in Chorley in terms of reducing dependence, building resilience, and community prevention.

The Executive will continue to be updated on progress of this work.

### 7. WELLBEING, PREVENTION AND EARLY HELP UPDATE

Rebecca Huddleston provided an update on the Lancashire County Council Wellbeing and Prevention and Early Help consultation, which is available on the LCC website. This proposes changes to service with £7.4million in savings by 2017/18. At present it is unclear what the service will look like in delivery as the detailed plans will need to be developed. It is likely that services will be delivered through the Neighbourhood Service Centres, with relevant service providers to support universal/targeted needs. Priorities will be "at risk" groups, and although there is a want to support early intervention, there is a concern that this element will not be resourced.

Rebecca asked the group on awareness of the consultation, and potential changes to services. Observations included:

- Changes to service delivery to demand led;
- Ability to support at universal level is likely to be less:
- Need to understand where resources are coming from, and how moderate level of need will be addressed, to avoid escalation;
- Context of young people/families identify cases when need presents, rather than anticipate where it will occur;
- Understand how we collect data/pick up trends;
- Understand how the 0-19 service links into other parts of the system; and
- Integrated Children Modelling should be flagged from Lancashire Care and Hospital as this may have an impact on property considerations.

Mel Ormesher advised that the service is in development, and needs to address a range of complexities in the consultation, as well as linking to the property strategy delivery. There is a want to ensure prevention is in place to reduce escalation into statutory services.

The Executive were encouraged to respond to the consultation from their own organisations, and Rebecca will send a response on behalf of the Chorley Public Service Reform Partnership to express want of the group to be recognised as part of the consultation, and to encourage the need to develop service for early intervention and prevention.

Action: Rebecca Huddleston to send a response to the Lancashire County Council Wellbeing and Prevention and Early Help consultation on behalf of the Chorley Public Service Reform Partnership.

### 8. LANCASHIRE COUNTY COUNCIL ASSET REVIEW

Mel Ormesher provided an update on the LCC Property Strategy. Papers submitted to Strategy in November, which included 220 front facing buildings covering a range of services. The proposals include the Neighbourhood Centre Model to ensure that buildings in place following the review, are delivering at full capacity and linking services together for the needs of the communities. This will include multi-agency services, although the majority will be LCC employed staff. Using the strategy of 34 service planning areas, and context from datasets of population/areas of deprivation, a publication of the list of properties to become the Neighbourhood Centres will be published in May 2016 for consultation. This will include reconfiguration of library services. A decision is expected at Cabinet in September, which will look at the buildings being developed, implications of remaining buildings e.g. asset transfer.

Observations made included:

- That Chorley has three planning areas, and there are opportunities to co-locate services in areas, not just within the LCC structure, but across all services to ensure that the right services are delivered in the right place;
- Chorley Council have flagged interest in potential assets which could continue to support a public service role:
- Piece of work completed by the CCG to review all GP practice buildings, considering footprint, treatment rooms capacity, impact of growth City Deal, and co-location opportunities. This work would be beneficial to link to the property strategy; and
- Task Group on Public Service Reform are also looking at co-location opportunities which could act as a testbed to proposals.
- Any co-located/new services should provide support, and look to reduce signposting in services.

### 9. ANY OTHER BUSINESS

Diane Gradwell advised that, building on the success of the Community Champions project (recently show-cased to Cabinet Office), Lancashire West Citizens Advice Bureaux which covers Chorley, South Ribble and West Lancashire, have had further success in securing five years funding for the Help through Crisis programme under the Big Lottery Fund. More updates to be given as the project progresses.

### 10. CONFIRMATION OF NEXT MEETING

At present the Executive meetings are set monthly, and from discussion it was agreed that the Executive would run less frequently during the next six months, and come together to consider findings from the programme delivery. Next meetings planned:

> 17<sup>th</sup> May 2016 19<sup>th</sup> July 2016 27<sup>th</sup> September 2016

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### **CHORLEY PUBLIC SERVICE REFORM EXECUTIVE**

### PROGRAMME UPDATE

#### **PURPOSE**

The purpose of this paper is to provide an update on key aspects of the programme and progress made since the last meeting of the Executive on the 15<sup>th</sup> March 2016.

### Members of the Executive are asked to:

- confirm that current progress is satisfactory and in line with expectations at this point in the
- provide a steer on delivery activity to ensure that outcomes will meet with expectations
- commit their organisations to supporting and resourcing proposed activity

#### **BACKGROUND**

The year 1 work plan for the Chorley Public Service Reform Programme was agreed by the Executive in February 2016 with a focus on 3 key themes and supporting activity to underpin delivery:

	Theme	Description	Focus activity			
1.	Building	Helping communities and	Appoint external provider to work			
	community	individuals to help themselves	intensively in Chorley inner-East to			
	capacity		engage, understand needs and			
			activity encourage behavior change			
2.	Establishing the	Ensuring a consistent experience	Locality task group of frontline			
	single frontline	whatever public service someone	partners to test new ways of working			
		first comes into contact with –	in the community, starting in Chorley			
		'making every contact count'	inner-East			
3.	Enhanced	Better coordination, reduced	Extended primary care MDT to bring			
	multi-	duplication and use of technology	together key partners with a primary			
	disciplinary	to share information and increase	care focus to target high			
	approaches	access to the most appropriate	dependency cohorts, understand			
		support	need and improve access to clinical			
			support			
SUPPO	RTING ACTIVITY					
•	Data and	Understanding and developing	Developing shared locality profiles			
	intelligence	ways to make better use of	and establishing data sharing			
		collective partnership intelligence	protocols with key partners			
•	Leadership and	Creating leaders of systems	Complete self-evaluation as a bench			
	culture	rather than organisations and	mark position, establish essential			
		embedding behaviours	behaviours and appropriate			
		throughout the system	development opportunities			



# PROGRAMME UPDATE - March – May 2016

The full year 1 delivery programme is attached at appendix A for information, with a summary of activity provided below and assigned a RAG (Red, Amber, Green) rating to show whether the activity is:

- Green progressing to timescale and budget
- Amber forecasting delays or budget issues
- Red experiencing issues

### Status summary:

Significant progress has been made in delivering the year 1 work programme with the majority of workstreams progressing as planned and therefore rated Green. Some aspects of supporting activity have been delayed to enable capacity within the Implementation Group to focus on delivery activity and although not posing any major concern for the wider programme, an Amber rating has been assigned along with clear actions to progress supporting activity in the next period. Key challenges over the coming months will be sustaining the resource commitment as delivery activity increases and continuing to allow teams to be flexible enough to engage in new ways of working.

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		В	uilding	Con	nmu	nity	Capaci	ity				
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	Building Community Capacity
Work completed	A full specification has been developed for community capacity building and engagement work which was issued for open tender with a submission deadline of 15 <sup>th</sup> April. Submissions were evaluated with support from Rachel Walker (LFRS) and the contract has now been awarded to SPICE.
	The inception meeting will be held w/c 16 <sup>th</sup> May to finalise the detailed project plan including mobilisation with the contract in place for work to start no later than the beginning of June.
Forward	Key milestones to be agreed with the provider:
plan and key milestones	<ul> <li>Engagement and assessment of community potential and assets including community consultation (using Chorley Conversation model) resulting in covering report with recommended approaches – June 2016</li> </ul>
	<ul> <li>Options for delivery of community initiatives and mobilization including set up and active facilitation of behavior change – July 2016</li> </ul>
	The delivery of this work will be overseen by the Implementation Group and link closely
	with the Locality Task Group.
Objective:	To gain a better understanding of community needs, motivations and generate examples of where a different approach can generate positive behavior change.
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Outcome:	Residents in the Chorley inner-East area will be more likely to help themselves and others and therefore less likely to come into contact with public services unnecessarily.
İ	and therefore less likely to come into contact with public services unfilecessarily.

	Establish the Consistent Frontline
Work	The locality task group for Chorley inner-East continues to be well attended with around
completed	15 frontline partner organisations or teams represented at the last meeting. The group
	agreed a plan on a page of key activity to be delivered in the short and medium term



	based on key themes of connecting partners; stakeholder engagement and; understanding need.
	Actions have been progressed including sharing team profiles, considering digital tools to better connect services/teams and developing service user persona's to understand how partners can work differently to meet the needs of an individual. A number of joint initiatives have also been agreed to test out the key principles of locality working.
Forward	Planned activity:
plan and key milestones	Community employability event - to be held in the Chorley inner-East area mid-June with DWP to arrange target client base. Event will provide wrap around advice and guidance to support individuals transitioning from benefits to employment including help with skills, training, childcare, volunteering.  Partner collaboration hub – 3 day pop-up event with all services or teams in the area to base themselves from a single venue in Chorley inner East area to facilitate
	information/intelligence sharing and encourage joined up working including joint visits.  To be confirmed as w/c 20 <sup>th</sup> or 27 <sup>th</sup> June.
	Community food programme – project with 'the Larder' to deliver food champions
	training scheme and wider programme of activity focused on cookery skills, health and
	wellbeing and sustainable food. First taster event completed with training to commence 18 <sup>th</sup> May.
Objective:	To test out the principles of collaborative partnership working in a focused locality to raise awareness of services, educate residents on alternative pathways, reduce duplication and help shape new models of locality working
Outcomes:	Frontline services and teams will operate outside their organizational boundaries as 'One
	Public Service for Chorley' with an early intervention and prevention focus whereby individuals receive a more consistent experience and onward pathway.

### **Enhanced Multi-Disciplinary Approaches**

# Work completed

Following an initial trial to confirm the process and cohort of partners/patients to be involved, a full extended MDT meeting was held on the  $\mathbf{1}^{\text{st}}$  April with Chorley Surgery including representation from adult social care, Police, Lancashire Wellbeing Service, Fire and Rescue, district nurse and community matron.

PMO continued to broker relationships with GP's from Regent House and Library House who attended to observe the second meeting of the extended MDT on the 29<sup>th</sup> April and will take part in the first three practice MDT (covering patient cohort of approx. 35,000 residents) in early June. Discover (Alcohol and Drug support service) also attended this meeting and keen to be involved in other aspects of the partnership.

Cases considered have shown significant added value from wider partner representation in terms of information sharing and ability to assign ownership.

# Forward plan and key milestones

- Coordinate 3 practice MDT meeting w/c 6<sup>th</sup> June
- Progress opportunities for hospital in-reach with geriatrician consultant resource -May
- Understand BwD/Transforming Lives Panel, and activity in Ribbleton/West Lancs, including data sharing approach
- Review intelligence and consider links with other multi agency groups for longer term



	<ul> <li>sustainability</li> <li>Consideration and development of Information Sharing Agreement with Extended MDT</li> </ul>
Objective	To reduce duplication and facilitate better information sharing to understand need and
	promote access to the most appropriate support as early as possible.
Outcomes	Solutions are identified to increase access to appropriate support and reduce demand for
	services.

	Supporting activity
Work completed	A range of supporting activity has been identified and all aspects of planned activity are now underway although in some cases later than anticipated due to capacity within Implementation Group and focus on delivery activity within the workstreams.
	Workforce Development:
	Self Assessment completed for Executive and Implementation Groups.
	Communications and Engagement
	Working group met 20 <sup>th</sup> April and draft plan agreed with further detailed
	deliverables to be confirmed (draft communications plan attached)
	Data and Intelligence
	Community risk profile work agreed with LFRS with work to start in June 2016.
	Locality profile information with LCC for consideration
	Co-ordinator recruited
	Primary Care Risk Profile to be developed alongside Extended MDT activity,
	which will be part of Co-ordinator activity
Forward	Progress workforce development through systems leadership development
plan and key	Finalise detailed deliverables and implement comms and engagement plan
milestones	MDT coordinator to commence coordination of multi-disciplinary groups,
	reviewing intelligence to date and considering possible solutions
	LFRS to commence risk profiling
	Develop performance management dashboard including key measures and
	indicators

### **Budget Position**

Funding of £300,000 has been secured through the Transformation Challenge Award (TCA) to accelerate activity around a number of specific initiatives. Spend committed in this period includes:

- Multi agency coordinator £40,000
- Contract to build community capacity £70,000
- Development of a community risk profile £20,000

### **Considerations for the Executive:**

1. The level of commitment required of Implementation Group members and their teams is likely to increase over the coming months as delivery becomes established - can the Executive continue to give a commitment of resources to the forward plan set out, with mandate to try new ways of working?



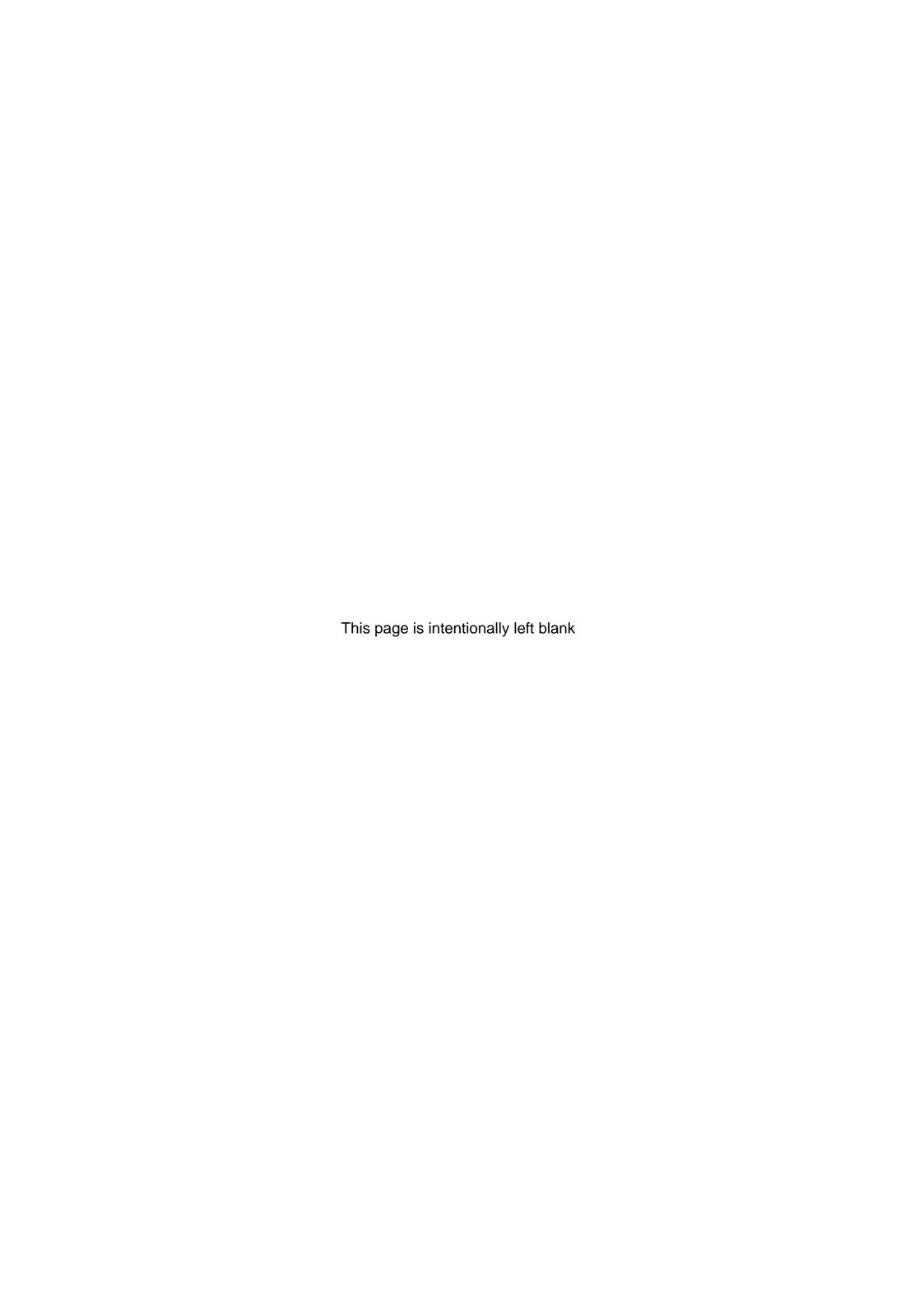
### Agenda Page 13 Agenda Item 3

2. Can the Executive advise if the scale and pace of activity is set at the right level and provide further direction on delivery to ensure that outcomes meet expectations when the evaluation is carried out later this year?





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Project Deliverables Agenda Page 15	Responsibility	F	М	A	М		J		S		N	D
BUILDING COMMUNITY CAPACITY	PMO											
Procurement of provider to deliver all elements of this workstream	PMO/IG				Π	Π					$\neg$	
Draft tender specification	Completed											
Advertise	Completed											
Award	PMO											<b>—</b>
Contract Confirmation	PMO											
Monitor against four areas (from June onwards)	PMO											
Community Engagement (TCA08)  Complete rapid Assessment of the locality area	Provider				$\vdash$						$\overline{}$	
Community conversation											$\overline{}$	
Final Report with recommendations												
Supporting action plan												
Community Capacity (TCA06)	Provider											
Proposals of change interventions specific to a locality, supporting front line deliverers												<u> </u>
An Implementation plan to support community mobilisation, including use of Time Credits and campaign outline												
Proposal for Model of Community Mobilisation												
Community based implementation  Community Befriending (TCA07)	Provider				$\vdash$							
Assessment of current provision	Provider				$\vdash$				$\dashv$		$\dashv$	
Route map for community befriending service										$\Box$	$\dashv$	
Community based implementation	IG											
Community Coproduction (TCA09)					$\dag \uparrow$						$\dashv$	
Detailed model on options for co-production to support future service planning	Provider		_		[ ]							
ESTABLISH THE CONSISTENT FRONTLINE												
Embed the Lancashire Wellbeing Service					$\coprod$							
Identify Stakeholders in the locality	Completed											
Raise awareness of the service	Task Group											
Identifying opportunities for outreach activity	Task Group				H							<u> </u>
Partnership Connectivity Testbed	Committee				$\vdash$	+				$\longrightarrow$	$\dashv$	
Set up Task Group end of Feb  Task group to man out activity and develop proposals	Completed Completed										$\dashv$	
Task group to map out activity and develop proposals  Proposals to April IG	Completed										-	
Implement proposals	Task Group										$\dashv$	
Standard Referrals Testbed (TCA01)	rusk Group											
Map points of contact and opportunities for early intervention	Task Group											
Review existing referral forms in partnership	Task Group											
Develop and Test of standardised question set based on Springboard methodology	Task Group											
ENHANCED MULTI-DISCIPLINARY APPROACHES				1		, ,						
Strengthen Primary Care Integrated Neighbourhood Teams (TCA2)												<b> </b>
Agree Primary Care involvement	Completed											
Agree process to link LWS into MDT	Completed											
Consider relevant data sharing agreement  Evaluate and consider future representatives	Completed				$\vdash$						$\dashv$	
Understand BwD/Transforming Lives Panel, and Ribbleton/West Lancs activity in joint panels	Co-ordinator PMO				$\vdash$						$\dashv$	
Trial different approach in managing cases	Ext MDT										$\dashv$	
Social Workers aligning to INT groupings	Co-ordinator											
Extended MDT												
Develop processes and tools												
Expressions of interest to form an MDT	Completed											
Identify how wider co-hort to be identified in locality area (e.g. additional GP groups)	Completed											<b>—</b>
ISA to be developed short term	Ext MDT											
Evaluate and consider links with other multi-agency groups long term	Co-ordinator											_
SUPPORTING ACTIVITY Workforce Development	DNAO											
Workforce Development  Communications and Engagement - Develop Communications and Engagement Plan	PMO PMO											
Data and Intelligence	FIVIO											
Locality Profile											$\dashv$	 I
Continue data collection to support profiling including health and social care date (LCC BI Team)	PMO								$\Box$		$\dashv$	 I
Consideration of Control area to benchmark activity	PMO											
Convene Information Governance workshop	PMO											
BwD Data Sharing Agreement	PMO				Ц							
Co-ordinator support to Multi-Agency Groups (TCA03)	PMO				Щ							
Draft job specification (including governance workshop)	Completed				$\sqcup$							
Recruit Co-ordinator	Completed											
Develop meeting plan and links	Co-ordinator										$\dashv$	
Evaluation Report  Development of Community Pick Profile (TCA04)	Co-ordinator				$\vdash$	+				$\vdash$	$\dashv$	
Development of Community Risk Profile (TCA04)  Meet with LFRS progress risk stratification element	Completed				${oldsymbol{ech}}$	+			-		$\dashv$	
Identify suitable local datasets for testing	Completed LFRS								$\rightarrow$		$\dashv$	
Test data through Locality MDT	LFRS								$\dashv$		$\dashv$	
Develop Model with options for scalability	LFRS										$\dashv$	
Development of Primary Care Risk Profile (TCA05)					$\dag \uparrow$						$\dashv$	
Meet with Locality MDT to progress areas of concern	Completed				[ ]							
Identify datasets for testing, involving CCG	Ext MDT				╓							
Test data through Locality GP MDT	Ext MDT				П							
Develop Model with options for scalability	Co-ordinator				$\coprod$	$\Box$						_
Digital Connectivity					$\sqcup$							
Progress Digital App (DCLG not successful Feb, Task Group taking forward)	Task Group											
Community-I Development (Go-on) understand position with LCC	PMO											
Testbed autonomy system April go live/June+July testbed	PMO											
Digital Health programme	PMO			<u> </u>								



'One Public Service for Chorley' Communications plan for the Chorley Public Service Reform Programme



# Overview

The purpose of this plan is to support partners to actively engage with the public service reform strategy and give a structure to how we will communicate with stakeholders.

We are currently in year one of delivery, testing and trying out new ways of working to help shape how we can achieve the objectives of our strategy in years two and three.

The early stages will focus on what we are doing and why, drawing partners together around common goals and starting the conversation with residents about why we are changing the way we all work together as partners and how they can be involved

The strategy aims to make system wide change but so that we can get something moving at pace, there will be a primary focus in the Chorley inner east area as this has been chosen as a pilot area for delivering some of these services.

The plan will be separate to, but have close links with, what is being done to create an integrated community wellbeing service for Chorley.

# Objectives

The Chorley Public Service Reform Partnership Strategy the purpose is stated as "We will work together to integrate and reconfigure public services in Chorley to provide the best outcomes for residents", and the vision is stated as "By 2020, we will have high quality public services which provide value for money and the best outcomes for the residents of Chorley".

To support the strategy, the objectives for the communications and engagement are:

- To develop a clear narrative for change
- To help us deliver the objectives of the public service reform strategy
- To illustrate the benefits to key stakeholders including GP's
- To engage staff, residents and other stakeholders in conversations setting out the case for change and benefits.
- To gain buy in and support from key decision makers

# Evaluation

The success of the communications plan will be determined by:

- How informed partners in public service reform feel about the programme
- Staff engagement in the process of changing to a new way of working
- How involved and informed wider stakeholders including GPs are in the process, using basic surveys, newsletters, peer groups
- Coverage in the local and trade press
- Output statistics on social media posts, email campaigns and website visitors
- Achievement against the objectives in the public service reform strategy
- Feedback from residents as part of public engagement, events (e.g. friends and family test, promotional material)

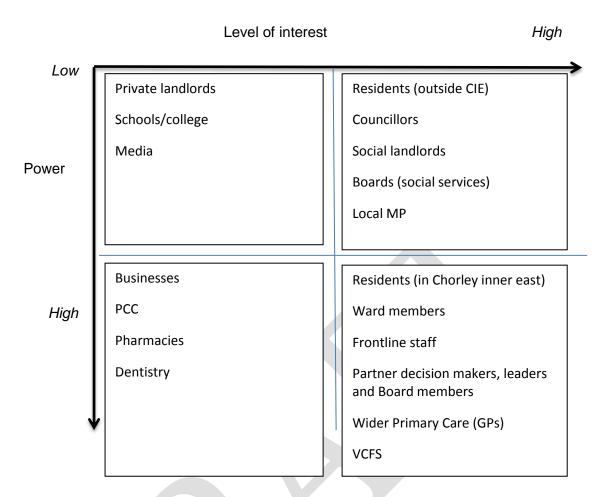
# Situational analysis

It is important that we set the context of where we are now:

Strengths	Weaknesses
Agreement on the issues A strong partnership approach	Lack of knowledge among the local community  Traditionally a hard to reach part of the community
Opportunition	Threate
Opportunities	Threats
We have clear data for this	Organisations not fully
area of Chorley and can	committing to the work
evidence any improvements	Not delivering the detailed plan on time.

# Audience

To be effective and give the greatest return on investment, the messages and methods for this plan need to be carefully targeted towards identified groups. The target audiences are included in the stakeholder map:



# Communications plan

# 1. The elevator pitch

By 2020, we will have high quality public services, which provide value for money and the best outcomes for the residents of Chorley.

There is a compelling case for change:

- We want to improve outcomes for individuals and communities and to save money for public services
- This will mean working differently together and making innovative use of our collective resources.
- The focus will be on early intervention and prevention to reduce demand by empowering communities to help themselves and making the right support available at the right time.

### Agenda Page 23 Agenda Item 3

- We need to help people choose healthier lifestyles so they can realise their full potential
- Understanding our community and making the most of its assets will be vital to increasing resilience
- The workforce need to lead the change with a focus to make every contact count, regardless to who it is
- The impact and benefits of the service will provide an opportunity to make public services sustainable.

The objectives for this part of the project are:

- To ensure all organisations including understand what we are doing and the part they need to paly
- Where activity is in a focussed area, to inform residents about what's going to be happening in their area and why

### Marketing channels

To ensure the campaign is successful it needs to make use of a range of channels in targeting particular messages and particular groups. The table below sets out how each of the main channels will be used in the campaign.

Marketing channel	Messages, considerations and approach
Local press and media	Local media will be used to inform people of the changes being made but as take-up in the Chorley Inner East area is low this will not be as important as other campaigns
Hard copy materials	As we are targeting a fairly small community who are traditionally hard to reach with information it is important we consider the use of flyers and posters to inform people of what's happening.
Trade press	It is important to continue the work already started to place Chorley as a place where innovative and different work is taking place.
Social media	The social media feeds of all organisations will be used in the normal way to support the messages of the campaign.
Events and meetings	Bringing the community together will be an important part of the work so events that celebrate achievements and outline what's happening will form part of the work.
Web	Websites are one of the most popular ways for people to receive information about what is happening. Although this work is being piloted in a small area of the borough it is important that people can find information about what is being done online.
Email	Email is the channel that prompts people to take action more than any other. Thought will be given to using email addresses for residents in that locality to keep them up-to-date with what's happening.
Organisation specific communication channels	It is important that all organisations involved keep staff informed of what's happening.  The PMO will manage key messages from the Executive and Board. It will be down to each organisation to identify the best way of getting the messages across to staff.

### 3 Key messages

The messages will need to be tailored to different audiences and will change as the proposals become clearer:

### Partner organisations

- The way we are delivering public services is changing
- We need to look beyond our teams and own organisations and work closer with our partners to ensure we are giving residents the best possible opportunity to fulfil their potential
- This might mean giving your managers and staff permission to take part in projects or initiatives that seek to test new ways of working and drive innovation
- It is an opportunity to get rid of the frustrations of working within the limits of your own organisation, particularly in relation to health and wellbeing services
- This is a pilot area so please feedback your experiences so we can develop a service that gives residents what they deserve

Note – the Chorley Public Service Reform strategy includes specific activity to develop workforce and culture which will require more detailed plans.

### Residents

- They say 'prevention is better than cure' our idea is for public services in Chorley that work together to prevent unnecessary emergency care
- It's really important that everyone looks after themselves what could we do to understand what wellbeing means to you, help you to empower yourself to maintain a healthy lifestyle
- We want to start a conversation in your (the Chorley inner-East) area you will start
  to see activity in your area so please help us by working together with us to make
  improvements, by getting involved e.g. VCFS

### GPS/health partners

- If we get this right it will make your job easier
- It is important you are familiar with initiatives and services being provided in the area where you work so you can effectively signpost patients to support in organisations outside the traditional NHS organisations.
- This is additional support for you to help your patients

# Deliverables

This communications plan will need to change and respond to the developments and decisions in the wider project. Therefore, the plan itself focuses at the moment primarily on the first few months, but also gives an overview of likely work to be undertaken in the future:

	Activity	When?	Comments	Lead
٦ -	(□	etailed delive	rables to be agreed)	
Month 1				
	What?	Mhan	Comments	Lead
th 2		When?  Detailed deliv	Comments verables to be agreed)	Leau
Month 2				
	What?	When?	Resourcing	
Month 3		(Detailed del	liverables to be agreed)	
Mor				

### **CHORLEY PUBLIC SERVICE REFORM EXECUTIVE**

### UPDATE ON THE MEETING OF THE CHORLEY PUBLIC SERVICE **REFORM BOARD**

### **PURPOSE**

This report provides an update on the inaugural meeting of the Chorley Public Service Reform Board held on Tuesday 26<sup>th</sup> April at Chorley Town Hall.

### **BACKGROUND**

The role of the Board as stated in the terms of reference for the Chorley Public Service Reform Partnership is:

- To hold the Executive to account for implementing the strategic vision and decisions made
- To bring the views of the community to the decision making process.

Each of the partner organisations was requested to identify an accountable representative with a mandate to hold their organisation to account.

### **UPDATE**

The Board was chaired by Peter Wilding OBE as an independent agent with the ability to bring objective challenge to the proceedings based on extensive experience of working on similar programmes nationally and also a baseline understanding of the reform programme through participating in the commission.

The Board heard an update from the Chair of the Executive on the progress against the year 1 work streams: building community capacity; establishing the single front line; and, enhanced multidisciplinary approaches. It was noted that some good progress had been achieved in a short space of time. The reform principles were also generally accepted. However, it was noted that the scale and pace of the work needed to be lifted and a whole system approach needed to be taken if Chorley partners were to fully meet the spirit of the reform principles.

The Chair facilitated a broad and open discussion with the Board on their role, taking views from each partner but then focussing in on joint ambitions and priorities and how to use the Board as a forum to drive progress on shared agenda's. The Chair posed three key questions to each member:

- 1. What is your most pressing issue at the moment?
- 2. What are the biggest strategic challenges facing your organisation in the medium term?
- 3. What do you want to get out of this partnership?



Issues ranged from immediate operational concerns such as the closure of Chorley A&E through to bigger cross-sector challenges, specifically budget cuts and managing demand for services. Challenges included organisational and geographical boundaries, recruitment and managing risk within the system. Board members collectively agreed that they wanted action, not just a talking shop, with an overall objective of better outcomes for local people.

### The Board agreed the need to:

- Identify and sign up to common principles and narrative of reform objectives, and the joint and individual commitments we will make to achieve those reforms
- Clearly articulate how Chorley public service reform fits with other work across the subregion as part of a coherent strategy rather than a collection of unconnected initiatives.
- Take opportunities to accelerate and broaden delivery of reform drawing on feedback from work stream delivery by the Implementation Group

#### **ACTIONS**

Proposed future actions included:

- Chair of the Board to write to Implementation Group and Executive Chairs and meet to discuss progression of the points above.
- Facilitation work with the Executive to be arranged for July meeting



### **CHORLEY PUBLIC SERVICE REFORM EXECUTIVE**

### LANCASHIRE COUNTY COUNCIL – PROPERTY STRATEGY CONSULTATION **PROPOSALS**

### **PURPOSE**

This paper provides an update on the Lancashire County Council (LCC) Property Strategy consultation proposals published on Friday 6<sup>th</sup> of May, summarising the changes and potential impact for Chorley specifically.

### Members of the Executive are asked to:

- Consider the impact of proposed changes for Chorley residents
- Consider the system-wide impact of the proposals in terms of future service provision
- Discuss whether it would be appropriate to submit a collective response to the consultation from the **Chorley Public Service Reform Partnership**

### **KEY POINTS**

- Lancashire County Council (LCC) have outlined their property proposals, service delivery models (Library and Wellbeing, Prevention and Early Intervention) and plans for consultation on this, in a paper to be considered by their Cabinet on Thursday 12<sup>th</sup> May 2016. Consultation will commence on the 18<sup>th</sup> of May for 12 weeks during which time expressions of interest can be made for those buildings identified for closure with proposals to take effect from October 2016.
- For Chorley, the proposals outline the retention of 10 buildings as Neighbourhood Centres and the potential loss of 11 buildings which have been identified as no longer being required for service delivery by LCC.
- The spread of proposed main service delivery within each of the potential future Neighbourhood Centres looks to be sufficient. Each locality area previously served by a library or children's centre will retain some level of service offer, except in the case of Adlington library, Highfield Children's Centre, Astley and Buckshaw Children's Centre and Brinscall Millfield Children's Centre.
- Further more detailed information on the service offer is needed to help understand changes in the level of provision, access and opening hours.

### **Consultation Proposals Summary**

LCC's property portfolio (excluding schools) comprises in the order of 500 operational sites. As part of the approved property strategy a total of 222 premises have been identified to form part of the review.

130 premises have been identified as preferred for retention as Neighbourhood Centres that will form the basis for service delivery. These Neighbourhood Centres will provide a base for the provision of services currently delivered through a range of single function building. 106 premises across the county have been identified as no longer being required to deliver LCC's future pattern of service delivery. The premises have been identified



through a process of data analysis, dialogue with members and partners and consideration of the proposals alignment with service delivery strategies.

Provision has been made within the county council capital programme for investing £20m in the future property portfolio to ensure it is fit for purpose to provide high quality services

### Buildings proposed to deliver LCC Services (Neighbourhood Centres)

In Chorley, 10 buildings are being proposed as Neighbourhood centres to deliver LCC services, the buildings and their proposed main service delivery are as follows:

Building Name	Proposed Main service Delivery
Children's Social Care (The Hawthorns)	Children's Social Care
Chorley Adult Disability Day Services (Bankside)	Adult Disability Day Services
Chorley Library	Library Service, Wellbeing, Prevention and Early help Service (0-19+years) (designated) and Youth Offending Team
Chorley Registration Office	Registration Service
Euxton library	Library Service
Fosterfield Day Centre	Older Peoples Daytime Support Service
Coppull Library	Library Satellite and Wellbeing, Prevention and Early Help Service (0-19+years)
Eccleston Library	Library Satellite and Wellbeing, Prevention and Early Help Service (0-19+ years)
Clayton Green Library	Library Service and Wellbeing, Prevention and Early Help Service (0-19years+)
Duke Street Children's Centre	Wellbeing, Prevention and Early Help Service (0-11 years) (designated)

### <u>Premises no longer required by LCC to deliver future pattern of service delivery</u>

11 buildings in Chorley have been identified as no longer being required and are outlined below:

Building Name
Adlington Library and Children's Centre (designated)
Astley and Buckshaw Childrens Centre (designated)
Blossomfields Children's Centre (Eccleston)
Chorley Adult Disability Day Service (Holly trees)
Chorley Youth offending Team (Halliwell Street)
Clayton Brook Children's Centre (designated)
Coppull Children's Centre (designated)
Coppull Young People's Centre



Highfield Children's Centre (designated)	
Millfield Children's Centre (Brinscall) (designated)	
The Zone in Chorley	

### Service access and resourcing

The library services offer will be on 5 different levels with opening hours ranging from 18-59 hours per week defined by local need as identified through information received in the opening hours survey carried out in 2014/15. For Chorley, 3 full library services will be retained in Clayton, Euxton and Chorley with two self-service satellite libraries in Coppull and Eccleston. In terms of Wellbeing Prevention and Early Help Services, the total resource in each locality will be defined by a varied scope and scale of provision subject to the needs of the community. The staffing resource allocated to each area is likely to be a combination of fixed and outreach activity but this is yet to be published, expected July 2016. Whilst the asset strategy tells us where services will be based, more information is needed to understand the scale, scope and level of provision.

### Buildings subject to service decisions

14 premises have been taken out of the review in the conduct of normal business processes or being subject to service budget options. In Chorley, this applies to the Woodlands Centre.

### Expressions of interest in potentially surplus premises

As part of the consultation, communities and groups are being invited to express an interest in taking over surplus properties.

There will be a 'whole transfer' and so groups will be taking on the full costs of running a building, and no financial support will be available from the Council once the transfer is complete.

### **LCC Next steps**

- Subject to approval by Cabinet on 12<sup>th</sup> May, a public consultation on the proposals will be held over 12 weeks beginning on the 18<sup>th</sup> May 2016
- Following consultation, a final set of proposals will be considered by Cabinet at its meeting in September 2016
- Implementation of any decisions is planned to commence with effect from 1<sup>st</sup> October 2016



