

# Chorley Public Service Reform Executive

Monday, 16 April 2018

**Present:**

Chair - Gary Hall (Chorley Council), Councillor Alan Cullens, Rebecca Huddleston & Cath Hudspith (Chorley Council), Supt Mark Winstanley & CI Mike Adamson (Lancashire Constabulary), Malcolm Dewhurst (Lancashire Fire and Rescue), Dr Shashidhar Khandavalli (The Chorley Surgery), Steve Winterson (Lancashire Care Foundation NHS Trust), Helen Curtis and Jayne Mellor (Chorley and South Ribble Clinical Commissioning Group), Craig Chapman (Lancashire Wellbeing Service), Amanda Jakeman (Department for Work and Pensions) and Tim Grose (Lancashire County Council)

**Apologies:**

Councillor Alistair Bradley, Sue Moore (Lancashire Care Foundation NHS Trust), Sarah James (Our Health, Our Care Programme), Diane Gradwell (VCFS Network), Janet Hodgson (Runshaw College), Allan Jones (Business Representative), and Councillor Margaret France (observer)

**OFFICER:** Hayley Hughes

**1.WELCOME AND APOLOGIES FOR ABSENCE**

Gary Hall welcomed everyone to the Chorley Public Service Reform Executive, and apologies were noted.

**2.MINUTES, MATTER ARISING AND ACTIONS OF THE MEETING OF THE CHORLEY PUBLIC SERVICE REFORM EXECUTIVE 30TH JANUARY 2018**

The minutes from the previous Executive meeting were agreed, with one amendment to the action relating to Our Health, Our Care. Further actions updated and cleared as:

Action: Karen Sharrocks to provide an update on the commissions around mental health at the next CPSR Executive – *cleared under agenda item 6.*

Action: Executive members to provide comments/feedback on the Intervention and Prevention Framework to Sarah James by COB Friday 2nd February - *cleared as information discussed at the Executive passed to Sarah James, and contact provided for further comments to be sent.*

Action: A number of next steps were proposed to mobilise the delivery plan, to be completed for presentation ahead of the next meeting of the Executive in March:

- Review partnership governance including structures and representation. For example, it may be appropriate to disband the implementation group and focus on the delivery methods outlined above with an overarching PMO -*cleared under agenda item 5*
- Establish programme resource including partner contributions through one to one meetings with partners - *cleared under agenda item 3*
- Develop the work streams into more detailed mandates with clear actions and milestones; and undertake further locality profiling to inform the work streams – *cleared under agenda item 4*

### **3.PARTNERSHIP RESOURCES**

Cath Hudspith presented the paper to update the Executive following request in January for partners to contribute to the Public Service Reform Delivery plan. In response to funding set out in January 2018, PMO support can be resourced from Chorley Council, and committed spend in the remaining budget for Chorley Public Service Reform has been confirmed as £47k, which will support delivery on relevant mandates, mainly workforce development and shared partnership intelligence.

In addition funding for recommissioning a third sector representative body for Chorley has been confirmed as £15k which has been allocated from Chorley Council, which will include support and development of the referent system.

Although there is limited commitment of funding for ongoing costs, from partner contributions and remaining committed funds from the Transformation Challenge Fund, there is sufficient resources and funding to support the Delivery Plan and mandates for the next 12 - 18 months.

Discussion included if personnel resource needs to be quantified, and this was clarified as being people resource from relevant organistaions to support activity as described in the mandates e.g. working groups, input from relevant teams in organisations.

A further contribution was put forward from Lancashire County Council in terms of building contribution to support locality working.

### **4.DELIVERY PLAN - OVERVIEW OF MANDATES**

Cath Hudspith advised that at the meeting in January, members considered the areas of focus as part of the Delivery Plan going forward, and this has been the basis for the development of detailed mandates, which include key activity, milestones and delivery approach.

Some will consider a wider geographical remit where appropriate, and link in with wider transformational activity e.g frailty pathways development, and others support cross cutting activity to support a number of areas e.g. shared intelligence.

The seven mandates which have been developed are:

1. Integrated Community Wellbeing reform key pathways;
2. Delivering the Out of Hospital strategy in Chorley;
3. Embed a sustainable locality for multi-agency early intervention and prevention;
4. Resilient Communities Plan;
5. Establish a shared intelligence system;
6. Leadership, Organisation and Workforce Development; and
7. Develop a Partnership Economic Reform Agenda.

The Executive were asked to confirm that the mandates presented have the right scope and timescales for delivery; are appropriate for the next stage of the public service reform; and support resources required.

Comments from Executive noted:

- Work presented builds on success from previous year's activity, and supports move to business as usual;
- Activity set to align better at Our Health, Our Care level;
- Clear focus on building personal resilience in communities, developing health and wellbeing services in localities;

- Integrated Care Teams to be considered as part of activity, supporting collaborative working, and population prevalence;
- Primary Care Support Team outcomes have been nationally recognized, and primary care should be key element to supporting out of hospital strategy and prevention agenda;
- Consider any risks on not being linked in with wider work at pan-Lancashire level;
- Activity is widened to other areas, not just focused on health e.g. economic reform, supporting wider determinants; and
- Impact on welfare reform changes will drive the need to work much better together.

Overall the Executive agreed that mandates supported the right direction of travel on public service reform. It is vital for the Integrated Care Teams and GP collaboratives to work together in the next phase of delivery to ensure that learning from the investment of Primary Care User Support Team is taken into account. The expectation will be for the mandates to be progressed by the leads set out, and updates will be reported to the Executive on a regular basis.

The Executive discussed the Leadership, Organisation and Workforce Development mandate in more detail as this required clarity on approach to support leaders of the future across public services. A suggested approach was:

#### Short-term

- Delivery of bespoke events for system leaders within Chorley, that focuses on transforming the way we deliver services
- Development of a module that could be delivered as part of existing organisation development and leadership programmes

#### Long-term

- Establishment of a bespoke organisational development programme provided by an external resource, and supported by existing internal development programmes e.g. Manchester Devolution model.

#### Views from the Executive included:

- Lancashire Constabulary are looking to broaden the leadership training through joint partnership activity which would be a key area to link into;
- NHS have a leadership academy (AQUA Leadership Development Programme);
- Consider level of delivery and if this could be developed at Central Lancashire level;
- Short term focus on Chorley and support building better relationships e.g. through co-hort of leaders in system (those driving transformational change in organisations);
- Leadership Neighbourhood/community work being considered as part of Integrated Care Teams; and
- Are all organisations focused on working together better.

**Action** – Executive to advise relevant representative for the working group for the Shared Intelligence system mandate to Cath Hudspith by 4<sup>th</sup> May 2018

**Action** – Executive to advise relevant representative for the Leadership, Organisation and Workforce Development mandate to Cath Hudspith by 4<sup>th</sup> May 2018

## 5.GOVERNANCE OF CHORLEY PUBLIC SERVICE REFORM PARTNERSHIP

Gary Hall advised the Executive on the background to a paper to reflect current governance, wider partnerships, and emerging structures. There is a complex set of networks and groups which perhaps need to be challenged in terms of ensuring the right governance is in place to support delivery of public service reform in the future.

As part of the programme delivery, how services are commissioned and how budgets are shared remains unclear, and can be a barrier to how services could be transformed,

especially if they are only short term i.e. 12 month commissioning. Jayne Mellor advised that the CCG commissioning intentions for 18/19 are available on CCG website.

The Integrated Care Partnership (ICP) should allow commissioning to be approached differently. Need to be clear on how Lancashire County Council are involved in this, and how things can be progressed on Central Lancashire Footprint.

The Executive agreed to the recommendations on the current structure and disband the Implementation Group and Board levels. It was acknowledged by the Executive that the Implementation Group has been successful in delivering the first phases of public service reform activity, and that the Board supported the direction of travel. As the work of the public service reform is moving to a delivery phase, it was agreed to include members of the Implementation Group in the relevant mandates. Additional representatives will be discussed as the work develops.

**Action** – Executive to consider groups they are involved in, and if these are linked into wider partnerships/remain fit for purpose

## **6.MENTAL HEALTH COMMISSION - UPDATE**

Helen Curtis and Jayne Mellor from Chorley and South Ribble CCG provided an overview on the Mental Health Commissioning work advising that mental health is being addressed equally, alongside physical health as part of the Out of Hospital Strategy. This should support bringing mental health back into localities, integrating with primary care/GPs, rather than being centrally based, which should in turn support patients better helping establish clearer pathways, and reducing risk of conditions deteriorating. The OOH Strategy has key commitment to support mental health to help reduce suicide levels, and also reduce exasperation of physical chronic conditions.

There are eight collaboratives within the Integrated Care Team which will consider how resources need to be matched to population prevalence, including best approach for specialisms. Timescales to have mental health practitioners in GP surgeries from summer 18, in addition Crisis Café in Preston is also in development, which supports reduced need to attend acute services. How patients are discharged, and the provision for in-patient beds, and a perinatal unit are all initiatives being progressed.

Comments from Executive included

- Prevention and work on wider determinants is key to this work, as well as focus on younger people.
- Children and Younger People Transformation work is also being factored into this work.
- The widening of options available will support partners supporting people with mental health issues at crisis point, and this was welcomed.
- Primary care are also key to this work as they manage large co-horts of patients where early intervention can be put in place;
- With work going forward there could be options at primary care level on care navigators supporting wellbeing and mental health; and
- All services seeing increase of mental health issues, in particular in Children and Families work.

Overall integration of services to manage crisis activity and increase investment in wellbeing provision at local level will all factor into support winter/acute pressures, and GP collaboratives can help shape how this work develops, using learning from Primary Care Support Team evaluation.

**Action** – Helen to advise how Executive members can be involved and input into this work being progressed

## **9.ANY OTHER BUSINESS**

No other business was raised.

## **10.DATE OF NEXT MEETING**

Next meeting to be held on 26<sup>th</sup> June 2018 at 16.00 Chorley Town Hall. Forward look on meetings:

- 25th September 2018
- 27th November 2018
- 26th February 2019
- 23rd April 2019