CAMBRIDGESHIRE AND PETERBOROUGH HEALTH & WELLBEING BOARD WHOLE SYSTEM JOINT SUB-COMMITTEE	AGENDA ITEM No.6
5 th March 2020	PUBLIC REPORT

ALLIANCE UPDATE REPORT

	RECOMMENDATIONS
То:	Cambridgeshire and Peterborough Health and Wellbeing Board Whole System Joint Sub-Committee
From:	Marianne Monie, South Alliance Director Robert Murphy, North Alliance Director

The Cambridgeshire and Peterborough Health and Wellbeing Board Whole System Joint Sub-Committee is recommended to:

Note the update from Alliances and provide any comments.

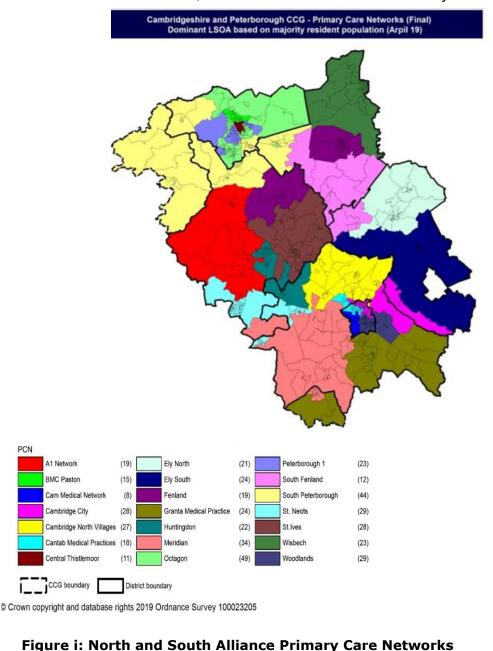
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1. BACKGROUND

1.1 In August 2018, two Provider Alliances were established in the 'Places' within our system; in Greater Peterborough, Huntingdonshire and Fenland (North); and Cambridge City, East and South Cambridgeshire (South).

Alliance membership includes senior representatives from all partner organisations: primary care, community services, mental health, social care, acute Trusts, voluntary services, County, District and City Councils and our Clinical Commissioning Group (CCG). Both Alliances are co-chaired by a Primary Care leader and an Executive leader of the local acute Trust; in the South, James Morrow (Granta) and Nicola Ayton (CUH), and in the North, Neil Modha (Central Thistlemoor) and Caroline Walker (NWAFT).

The South Alliance serves population of 416,000. The footprint broadly follows the flow of citizens into CUH services, and includes 9 Primary Care Networks. The North Alliance serves around 568,000 citizens and covers 12 Primary Care Networks.



The vision of the Alliances is to bring providers together to address the triple aims described in the Five Year Forward View, by improving **quality** of care for patients and service users; **outcomes** for the local population; and **value** for the taxpayer.

1.2 This report is for the Cambridgeshire and Peterborough Health and Wellbeing Board Whole System Joint Sub-Committee to consider under its Terms of Reference,

Authority to approve non-statutory joint strategies on health and wellbeing issues (e.g. Cambridgeshire and Peterborough suicide prevention strategy), subject to agreement by the Chairs and Vice-Chairs of the two parent Health and Wellbeing Boards.

2. PURPOSE

2.1 A. Primary Care Networks

Primary Care Networks (PCNs) launched in July 2019 with the introduction of a new National General Medical Services contract. PCNs are GP practices working together to cover communities of 30-50,000 and providing wider primary care services, and the cornerstone of our local Integrated Neighbourhood model.

Alliances have worked closely with PCN Clinical Directors of all 21 PCNs across Cambridgeshire and Peterborough to co-design support, taking into account each PCN's maturity and the needs of the local population they serve. Working closely with CCG colleagues, each PCN has accessed support in line with the key domains of PCN development nationally:

- Leadership and partnerships: clinical backfill for staff; networking opportunities with clinicians from secondary and community care; and participation in the Judge Business School Primary Care Innovation Academy.
- **Population health management:** access to bespoke population health data packs in the short term; and implementation of Eclipse and RAIDr population health management tools in the medium term.
- **Managing resources:** bespoke workshops on establishing new, joint organisational forms and shared finances.
- Integrating care: through our local Integrated Neighbourhoods programme; and guidance on recruiting key new roles (i.e. Social Prescribing Link Workers and Clinical Pharmacists).

In addition, Alliances have developed a PCN Innovation Fund. Based on learning from leading Integrated Care Systems (ICSs), Alliances have supported all PCNs to bid for seed funding to enable development of elements of their Integrated Neighbourhood model, which will improve outcomes for their local population. All PCNs across Cambridgeshire and Peterborough are implementing Innovation Fund projects with support from Alliance teams. Please see **Annex A** for a summary of South Alliance Innovation Fund projects.

B. Integrated Neighbourhoods

In December 2018, the North and South Alliances developed the Integrated Neighbourhood Framework. This outlines the aspiration to bring together primary, secondary, community, social and voluntary services to provide proactive and

integrated care for local people.

Integrated Neighbourhoods build on the learning from local Think Communities and Neighbourhood Cares programmes. The aim is to change the relationship between public services and local citizens, and empower people to make informed choices about their health and care needs. Representatives from District and City Councils form part of our local Integrated Neighbourhood Boards and are helping to change the conversation with patients and local people away from "what can we do for you" to "what matters to you".

PCNs are the cornerstone of our local Integrated Neighbourhood model. The Alliance team are supporting the most advanced PCNs as the second waves one and two of Integrated Neighbourhood accelerator sites in 2019/20. These are:

North Alliance

- Central/Thistlemoor
- BMC Paston
- Wisbech
- South Peterborough

South Alliance

- Ely South
- North Villages (practices surrounding Northstowe new town)
- Cantab (in inner city North Cambridge)
- Granta (wave one from 2018/19)

Based on the learning from the first wave, the Alliances have developed a standard offer of support for accelerator sites. This includes:

- (a) Establishment of an Integrated Board, including representatives from local health and care organisations and District/City Councils;
- (b) Funding for a workshop to bring together staff and patients to agree a local vision and priorities, based on population health data and experiences of local people;
- (c) Tools and learning, including analytics, evaluation and access to data;
- (d) A dedicated Project Manager.

We will use this approach to scale the implementation of Integrated Neighbourhoods across Cambridgeshire and Peterborough over the next 5 years. We have set out the following trajectory in our local Long Term Plan:

- In 2019/20: 8 Integrated Neighbourhoods implemented: 4 in the South and 4 in the North.
- In 2020/21: a further 13 Integrated Neighbourhoods implemented: 5 in the South and 8 in the North.

North Alliance: Integrated Neighbourhood progress

In **South Peterborough** Integrated Neighbourhood, local staff and patients have identified the following priorities:

 Carers: raising awareness amongst patients and professionals of the support available to carers, and ensuring carers are given information and guidance, particularly in relation to emergency planning to reduce unnecessary hospital

- admissions for the cared-for person.
- Falls: increasing awareness amongst the wider patient population of the risk of falls and how to prevent these. Enabling Integrated Neighbourhood to ensure all people who have had a fall have their needs met by the right professional, in the right setting at the right time.
- Access: facilitating education and access to services in rural areas, with the aim
 of reducing social isolation, risk of harm and unplanned admissions to hospital
 for local people.

Similarly, **BMC Paston** Integrated Neighbourhood are focusing on enhancing care for carers and people at risk of falls, as set out above. In addition, the Wildflowers Innovation Fund project aims to provide weekly drop-in sessions at Boroughbury Medical Centre for local sex workers to access vital health and wellbeing services.

Wisbech Integrated Neighbourhood have identified a number of priorities relating to health and wellbeing, based on the views of local people identified through the 'I Love Wisbech' project and a number of events with Integrated Neighbourhood staff and residents. These include:

- Smoking cessation: with the central aim of reducing the prevalence of smoking in Wisbech.
- Improving local mental health: including joining up working between multiple agencies and providers, with the aim of improving outcomes for Wisbech citizens.
- Developing a Directory of Service: this single list of all public and voluntary services will enable Wisbech citizens to access services and meet their wellbeing needs.
- Encouraging community-led action: with the aim of empowering the community to take care of themselves and one another. This will be enabled by greater engagement with Wisbech citizens on the design of future health and care services.

Central/Thistlemoor Integrated Neighbourhood have held two events with local patients, staff and partners across the local health and care system to date. Work is underway on projects relating to children and families; engagement with large-scale employers, such as Amazon, on improving health outcomes for local employees; and the uptake of healthcare screening, among other priorities.

South: Integrated Neighbourhood progress

Wave 1

Granta Integrated Neighbourhood formed in January 2019. Granta were the first Integrated Neighbourhood to launch in Cambridgeshire and Peterborough due to their established network model prior to the new PCN contract implantation in July 2019. The projects currently underway in Granta Integrated Neighbourhood include:

• The Wellbeing Hub which is enabling the coordination of staff and resources across the care and voluntary sector, using Granta Medical Practice as a 'hub' and employing an MDT model with Granta's Social Presciber/Link Worker,

- social care, voluntary sector and discharge coordination staff. The model will build on learning from Cambridgeshire County Council's 'Neighbourhood Cares' model and pilot a new approach to rapid discharge.
- Wound Care Pathway will coordinate wound care across our health care system, with the aim of delivering leg ulcer care more efficiently and effectively in the community. This will include including a cutting-edge preventative treatment for preventing leg ulcers, as part of a Boston Scientific research project endorsed by the Department of Health and Social Care.
- Neurology Outpatients project which is enabling clinicians from primary and secondary care to work together to understand the needs of patients who are referred from Granta to Addenbrooke's secondary care neurology services. The aim is to design and implement a new approach to the delivery of traditional outpatients services which is replicable for other clinical specialties. Initial outcomes demonstrate a sustained reduction in onward referral to secondary care neurology services.

Wave 2

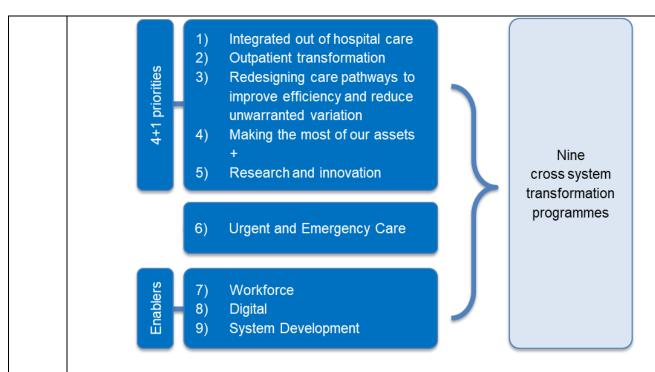
Ely South's Integrated Neighbourhood launch event, on 15th January 2020, had attendance from around 100 people from primary, community, social and acute care and the local community including volunteers, teachers, business and residents. Emerging priorities are around obesity and diabetes, and the health of local migrant workers, working in conjunction with local agriculture employers.

Cantab are working closely with the other Cambridge city-centre PCNs and MIND to develop an innovative approach to student physical and mental health, for local students from Anglia Ruskin and Cambridge University. Their launch event is taking place on the 27th February 2020.

North Villages are working to develop a hub and spoke model of care around Northstowe Healthy New Town, utilising the new Civic Hub due to be developed in the coming years.

Future Alliance model

In our local Long Term Plan, Alliances have set out their plans to develop a place-based model of care for local citizens; further integrating the delivery and design of health and care around our two 'places'; and taking on accountability for the delivery of outcomes for our local population. In keeping with this, our Alliances will support the delivery of our system's key Long Term Plan commitments in 2020/21:



Next steps for Alliances

- Continue implementation of Integrated Neighbourhoods across Cambridgeshire and Peterborough, including Innovation Fund Projects, working closely with County, District and City Council colleagues. Aim to have full coverage by April 2022.
- 2. Continue programme of engagement and enable clinicians and operational staff from primary, secondary, community and social care to work together to design and implement new pathways and interventions.
- 3. Develop future Alliance model, taking on more accountability as a group of providers for the health and care outcomes for the local population.

3.	CONSULTATION
3.1	N/a
3.2	N/a
4.	ANTICIPATED OUTCOMES OR IMPACT
4.1	N/a
5.	IMPLICATIONS
	Financial Implications
5.1	N/a
	Legal Implications
5.2	N/a

	Equalities Implications
5.3	N/a
6.	APPENDICES
6.1	List any appendices to the report.
	Annex A – Summary of South Alliance Innovation Fund projects
7.	SOURCE DOCUMENTS
	N/a