

ISLE OF ANGLESEY COUNTY COUNCIL

REPORT TO :	Partnership Scrutiny Committee
DATE:	25/09/14
SUBJECT:	Work programme for the Anglesey Integrated Delivery Board for Health and Social Care Services
PORTFOLIO HOLDER(S):	Councillor Kenneth Hughes
REPORT AUTHOR: Tel: E-mail:	Margaret Peters 01248 751812 MargaretPeters@ynysmon.gov.uk

1.0 Purpose of Report

- 1.1 To seek comments and recommendation of the Scrutiny Committee with regards to the work programme for the Anglesey **Integrated Delivery Board (IDB) for health and social care services**

2.0 Background

In January 2014, the Council's Executive and BCUHBs Executive Team approved the establishment of a joint Health and Social Care IDB for Anglesey to ensure that the health and care needs of the local population can be better served by the **improved integration** of services between Health and Local Authority services. The Council's Executive Committee noted that a shared action plan should be presented for consideration by the Council during the Autumn of 2014. This report will also be presented to the BCUHBs Executive Board.

One of the key recommendations following a strategic development workshop held in March 2013 was the need to set up an IDB for community health and social care services for Anglesey.

In July 2013, the Welsh Government published a Consultation Document ('Framework for Integrated services for Older People with Complex Needs': David Sissling) that sets out requirements and expectations on Health Boards and Local Authorities to accelerate the pace of integrating health and social care services and to embed these into mainstream service delivery by the end of December 2014 in order to facilitate access to services and to improve outcomes for citizens.

2.1 North Wales Statement of Intent

The 'Integrated Services Framework' document placed an expectation on Health Boards and Local Authorities at the regional level to produce a '**Statement of Intent**' that outlines the current situation and future intent to produce a Work Programme that will promote more formal collaboration to deliver and embed integrated services within mainstream provision by the end of 2014. In response, the Statement of Intent of the 6 North Wales Local Authorities and Betsi Cadwaladr University Health Board to deliver integrated services for Older People with Complex Needs has been submitted to Welsh Government along with an accompanying action plan.

Whilst the Framework document requires the Statement of Intent to be focused on Older People with Complex Needs there is recognition that this approach should be adopted for all other service user groups in the future.

The IDB has chosen to adopt such a broader approach from its outset and the "Statement of Intent" comes within the remit and scope of the Board and proposed action plan.

2.2 Aims and Objectives and Accountability of the IDB

The aims and objectives of the IDB is to work towards delivery of 'single services'. This includes improved alignment of business plans, budgets and organisational cultures. The IDB will include consideration of innovative approaches to pooled budget frameworks for Anglesey to make best use of the resources available. The IDB will take on the role of a "county forum". The IDB will take the opportunity to review its function following the announcement of the restructure of BCUHB and the review of the LSB.

The Board will be accountable to the BCUHB Board and democratic processes within the Local Authority and the Board will be reporting to the Local Service Board.

2.3 Drivers (Operational and Strategic)

An expectation is placed on Health Boards and Local Authorities to integrate services in the national policy context outlined in:

- '**Together for Health**' that sets out the ambition for person-centred health services to be provided as close to home as possible.
- '**Sustainable Social Services in Wales**' that envisages a social care service based on outcomes focused portable assessments and enabling people to make informed decisions, with more consistent care eligibility and planning.

- **The Social Services and Well-being (Wales) Act** will significantly strengthen the legislative requirements for Health Boards and Local Government to integrate services. The Act also highlights the importance of developing more integrated health and social services for all user groups.
- **Setting the Direction (Locality Team development - Model Môn)** In 'Setting The Direction' the development of locality working was seen as the cornerstone of the new model for primary and community care. Based on populations of between 30,000 and 60,000, more than sixty locality networks have been established across Wales to plan, co-ordinate and ensure delivery of services to meet the needs of people living in the local community. The IDB will complement and strengthen the policy direction of localities as identified within "Setting the Direction".

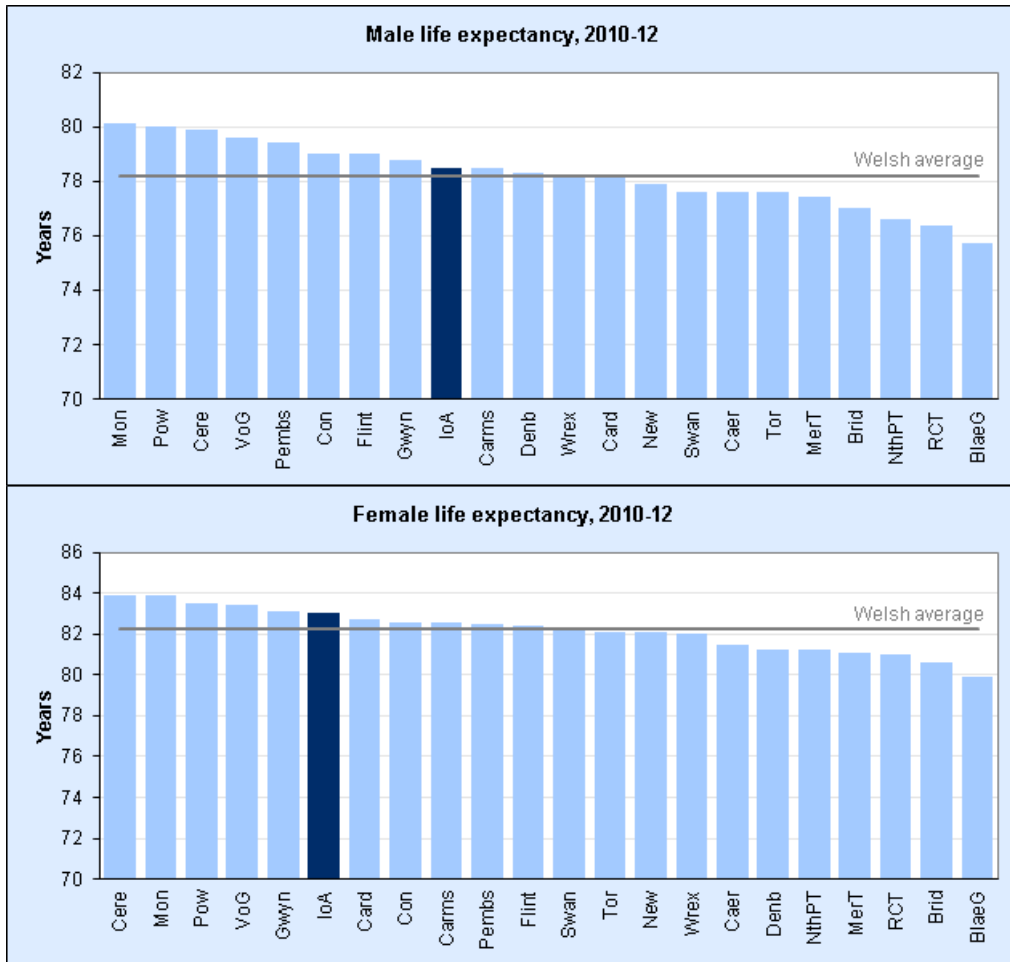
2.4 Demography and trends (Managing demand & Local Need)

- The resident population of Anglesey is projected to increase by 4% from 2006 to 2031.
- In 2009 19.5% of children were said to be living in poverty on the Isle of Anglesey
- 21.9% of the total population of the Isle of Anglesey was aged 65+ in 2010, compared with 18.6% in Wales as a whole. This is the third highest proportion of people aged 65+ across all local authorities in Wales.
- The rate for children and young people reported as disabled according to Disability Discrimination Act definitions is 7.3% of the 0-18 population which gives an estimated total of 1027 children with disabilities in 2012.

There is a recognised need for a joint approach to planning and delivering older people`s services, in particular within Anglesey where the projected % increase of people over 75 years of age is set to double from 9% to a staggering 18% by 2033.

The life expectancy for males and females on Anglesey is reported to be higher than the Welsh average as shown in the diagrams below.

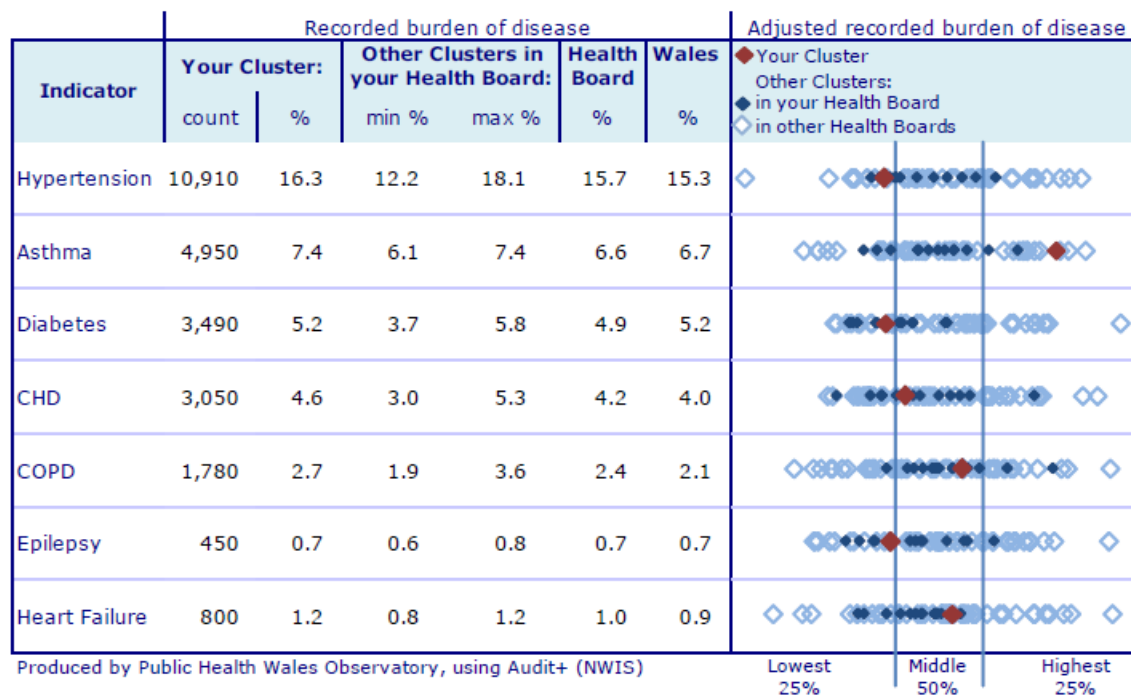
The demographic information available supports the purpose and commitment of integrated working.



*Ref: 'Welsh Government, Statistics for Wales (August 2014)
Local Area Summary Statistics, Isle of Anglesey'*

Chronic condition registers

The diagram below shows recorded and adjusted recorded burden of disease in Anglesey GP cluster, showing other GP clusters in Betsi Cadwaladr UHB and Wales for comparison, 2012:



Ref: NHS Wales, Public Health Wales Observatory: GP Cluster Profiles, BCUHB

2.5 Working together

The changing structure of the population means more pressure and greater demands on a range of services e.g. health care, domiciliary and residential services, housing, welfare and other services used by the population. This requires collective action and early intervention to empower and support people (Gwynedd & Mon Single Integrated Plan 2014)

Since public finances are limited, effective engagement with our service users and communities is of paramount importance and the IDB will focus on transforming services to ensure resources are most appropriately aligned and deployed to meet the needs of the people of Anglesey.

This means strengthening the planning and co-ordination of care and support, with both organisations working closely together to develop a truly integrated health and social care system that provides people-centred and whole-person care. The health and social

care system faces a number of challenges in particular relation to integration, which are widely attributed to:

- Increase in people with long term conditions (adults and children), multiple morbidities and an ageing population.
- Fragmented care.
- Public health pressures and widening health inequalities.
- Reduced finances with increased expectation and demand.

The IDB will provide the governance arrangements in relation to specific projects/work streams for integrated working such as:

- Single Point of Access for Adult Services
- Specialist Children's Services (Section 33 Agreement in place)
- Integrated Community Adult Mental Health Service
- Health and Social Care Support Workers
- Integrated Family Support Service/Team
- Intermediate Care Fund projects (specifically the Co-located multi disciplinary health and social care teams and the provision of 7 day community support for Anglesey).

These initiatives testify a strong tradition of engagement and collaboration.

Nevertheless it is evident that further benefits could be secured by greater strategic alignment and improved governance of these individual work streams.

2.6 Recognising Priority Areas and benefits.

Facilitated workshops sessions have been held for all stakeholders to identify shared priorities based on respective organisational drivers and responsibilities. There has been good engagement from both agencies including member representation from the Local Authority and Health Board. Additionally the work programme has included a session with senior and middle managers in both agencies along with a dedicated session to secure the priorities as identified by partners in the Third and Independent Sector.

It is vital that decisions to prioritise services are not based on intuitive beliefs, incomplete information or conflict with NHS and Social Care strategic goals. The impact on health and social care will need to be made explicit when decisions are made to provide resources for some areas and not others.

Any prioritisation framework must therefore provide a robust, transparent and fair process to:

- Increase public and patient confidence;

- Be operationally more efficient;
- Align resources to agreed strategies and policies that improve the overall health and wellbeing of the population and improve the quality of services;
- Ensure competing needs are given a fair hearing;
- Provide better value for money and budget allocation requirements;
- Add legitimacy to decision making;
- meet the requirements of good corporate governance;
- Be underpinned by a sound evidence base wherever possible;
- Inform and promote appropriate planning to meet future needs.

Services will need to be reviewed and developed to make sure that they meet shared specifications and quality standards.

Based on the information gleaned from the IDB and joint sessions, the following have been identified as the key priorities which address the immediate delivery needs and more mid-term development requirements of both agencies:

i) Intermediate Care Fund Integrated health and social care projects

Outcome: A strengthened integrated localised, community based services across Health and Social Care that provides a more streamlined efficient service. To empower older people on Anglesey by giving them as much independence, choice and control as possible in their future care.

The effective delivery of these projects will have a positive impact on unscheduled care and any unnecessary admissions to hospital.

Examples include the implementation of projects such as the pilot for co-located multi disciplinary health and social care teams in the GP surgery, Amlwch and Plas Mona Residential Care Home on Anglesey and the provision of 7 day community health and social care support in people's own homes. The focus will be on these projects for the first year. Current unscheduled care demand in Anglesey will be mapped out and research undertaken about potential interventions to reduce demand and maintain independence. Pilot high impact changes and evaluate effect.

ii) Specialist Children's Services

Outcome: An Integrated services for children and young people into a one-stop service with clear pathways of multi-agency response, so that arrangements are simple, clear and make sense to families.

A co-located multi-disciplinary health and social services team for children with disabilities has been established for a number of years. In 2011, work commenced on

the development of a formal section 33 agreement between Health and Social services to underpin the development of a more integrated service under a single management structure. The Section 33 agreement is now in place and an Integrated Service Manager is in post since 2013. A new co-productive service model is being developed in consultation with key stakeholders and families of children with disabilities / long term health conditions.

iii) **The 'Front Door' for Children's Services**

Outcome: To help the children of Anglesey to live safely within families, which improves the outcomes for children and reduces the dependence on costly specialist services.

A review of the 'front door' of Children's Services was undertaken, looking at processes to respond to referrals, the thresholds used at different points in the service pathway. It is reported that a large part of the Children's Services budget is spent on interventions such as fostering and residential placements for 'looked after children' in comparison with the budget spend on interventions that prevent escalation of difficulties. A programme is being put together to transform the service, starting from the front door. A multi-agency Single Point of Access is being considered as part of this programme and will be reported by December 2014.

Preventative work will be a theme throughout the IDB programme and an important part of its vision. A central aim of the IDB should be to enable people to stay at home safely and that agencies can prioritise their resources in accordance with best practice principles.

3.0 Recommendations

That the Scrutiny Committee approves the attached work programme for the IDB so that the Board can assist in the development of Community Health and Care Services on Anglesey.

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Job Title: Collaboration Improvement Officer

Date: 16/09/14

APPENDIX 1- IDB Work Programme and report references

APPENDIX 2- Membership list for the IDB

Integrated Delivery Board (IDB) for Health and Social Care services for Anglesey ACTION PLAN

Workstream	Actions/tasks to be done	By when	By who (IDB lead member/sponsor)	RAG status Red - Overdue Amber - On track Green - Completed
Develop appropriate governance arrangements for the IDB moving forward	Review the IDB governance arrangements in light of BCUHB Structural changes. Map out and evaluate governance arrangements for individual projects and integrated services in-scope and make recommendations for improvement/changes as necessary.	January 2015	Andrew Jones supported by Gwen Carrington	
Unscheduled Care demand reduction	Map out current unscheduled care demand in Anglesey Research potential interventions to reduce demand and maintain independence. (Cross reference with ICF work). Pilot high impact changes and evaluate	Ongoing	Craig Barton & Alwyn Jones	

	effect.			
Intermediate Care Fund - Pilot of Co located MDTs on Anglesey	<p>Co-locate Social Care and Health staff in the GP surgery in Amlwch and Plas Mona in LlanfairPG (initially these 2 sites, with potential for a 3rd and 4th sites during the lifetime of the project.</p> <p>MDT up and running in both locations</p> <p>Develop evaluation process</p> <p>Determine programme for further co-location including third location</p>	<p>End of August 2014</p> <p>September 2014</p> <p>October 2014</p> <p>September 2014</p>	<p>Alwyn Jones & Wyn Thomas</p> <p>Alwyn Jones & Wyn Thomas</p>	
Intermediate Care Fund - Provision of 7 day community health and social care support for the people of Anglesey	<p>Recruit staff</p> <p>The team is operational</p>	<p>Completed</p> <p>End of August 2014</p>	<p>Alwyn Jones & Wyn Thomas</p>	
Abolition of panels (not just health and social care)	<p>Identify current panels in place, purpose, function, and governance arrangements.</p>	<p>End of October/ November 2014</p>	<p>Alwyn Jones & Wyn Thomas</p>	

panels)	Identify opportunities to rationalise and or abolish where appropriate and associated risks and mitigation.			
Scoping enabling and authorising the delegation of budgets for staff.	Senior manager to scope agree options for consideration by LA / BCUHB Review the appropriate level of delegation and authorisation to speed up decisions	By April 2015	Andrew Jones & Gwen Carrington	
Social Demographic needs of the population of Anglesey	IDB to determine how to collate information regarding resources, costs of services, how budget decisions are taken and the population needs of Anglesey. Health and social care needs assessment to be produced as part of Social Care and Wellbeing Act by (guidance issues Spring 2015) Interim arrangement: to review existing health needs assessment reports produced and agree current applicability. Develop map of health & social care resource utilisation to understand current state and inform future direction.	End of January 2015 To be determined by 2015 By end of January 2015 By end of January 2015	LSB (Anwen Davies & Sarah Andrews)	


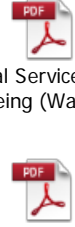
<p>Integrated Community Mental Health Service</p>	<p>Develop a shared understanding of:</p> <ul style="list-style-type: none"> • Current integration of adult and opmh services • Scope of proposed integration programme <p>An MoU for the service will be agreed by operational managers and endorsed by the respective agencies.</p> <p>Provide a joint response to the National Assembly Wales consultation (post-legislative scrutiny to assess the implementation and operation of the Mental Health (Wales) Measure 2010)</p>	<p>October 2014</p> <p>December 2014</p> <p>Closing date for responses: 12 September 2014</p>	<p>Mark Couchman & Alwyn Jones</p>	
<p>Specialist Children's Services</p>	<p>Four consultation sessions held for families focussing on 'short breaks'. Children and their families consulted about the services they would like to see. This feedback will inform the new model for the service.</p> <p>Commissioning and Management Board to redefine the TOR, review membership and QA/performance management.</p>	<p>August 2014</p> <p>Meeting/workshop to be held in Oct 2014</p> <p>December 2014</p>	<p>Anwen Hughes & Cilla Robinson</p>	

	A new service pathway supported by a business plan will be proposed.			
The 'Front Door' for Children's Services	<p>Conduct a review of the 'front door' of Children's Services looking at processes as cases came in, the thresholds used, and cases at different points.</p> <p>Establish project for service transformation for children's services and a single point of access</p> <p>Scope out options</p>	<p>Completed</p> <p>September 2014</p> <p>October/November 2014</p>	Anwen Hughes & Cilla Robinson	
<p>Actions for the IDB taken from the North Wales statement of intent ('Framework for Integrated services for Older People with Complex Needs') action plan:</p>				
Integrated locality and community based services	Agree localities for initial implementation of integrated teams	September 2014	County Fora (IDB)	
Integrated information and advice and data sharing	<p>Identify potential of CCIS to support integration</p> <p>Award final tender</p> <p>Go live</p>	<p>By December'14</p> <p>By March 2016</p>	County Fora (IDB)	

Cyfeiriadau perthnasol ar gyfer y Bwrdd Cyflawni Integredig ar gyfer Gwasanaethau Iechyd a Gofal Cymdeithasol yn Ynys Môn:

Relevant references for the Integrated Delivery Board for Health and Social Care Services for Anglesey:

<p>Welsh Government, Statistics for Wales (August 2014) : Local Area Summary Statistics, Isle of Anglesey</p> <p>(Technical report available in English only)</p>	
<p>NHS Wales, Public Health Wales Observatory: GP Cluster Profiles, BCUHB</p> <p>(Technical report available in English only)</p>	
<p>Welsh Government. Together for Health. A Five Year Vision for the NHS in Wales. Cardiff: WG; 2011.</p> <p>Llywodraeth Cymru. Law yn Llaw at Iechyd. Gweledigaeth 5 mlynedd ar gyfer y Gwasanaeth Iechyd Gwladol yng Nghymru. Caerdydd: LIC; 2011.</p>	 <p>Together for Health English.pdf</p>  <p>Together for Health Cymraeg.pdf</p>
<p>Welsh Assembly Government. Setting the Direction. Primary & Community Services Strategic Delivery Programme. Cardiff: WG; 2010.</p> <p>Llywodraeth Cynulliad Cymru. Gosod y Cyfeiriad. Gwasanaethau Cychwynnol a Chymuned - Rhaglen Strategol ar Gyfer Cyflenwi. Caerdydd: LIC; 2010.</p>	 <p>Setting the Direction English.pdf</p>  <p>Setting the Direction Cymraeg.pdf</p>

<p>David Sissling, Llywodraeth Cymru / Welsh Government (Hydref/October 2013):</p> <p>Fframwaith ar gyfer Darparu Iechyd a Gofal Cymdeithasol Integredig</p> <p>A Framework for Delivering Integrated Health and Social Care for Older People with Complex Needs</p>	
<p>Social Services and Well-being (Wales) Act 2014</p> <p>Deddf Gwasanaethau Cymdeithasol a Llesiant (Cymru) 2014</p>	 <p>Social Services and Wellbeing (Wales) Act</p> <p>Social Services and Wellbeing (Wales) Act</p>

Appendix 2

Integrated Delivery Board members:

Isle of Anglesey County Council:
Gwen Carrington, Corporate Director of Community
Anwen Huws, Head of Children's Services
Alwyn Jones, Head of Adult's Services
Nicola Roberts, Councillor
Kenneth Hughes, Councillor
Bethan Jones, Deputy Chief Executive and member of Gwynedd and Môn Local Service Board
Gwynedd County Council:
Anwen Davies, Senior Partnerships Manager, Gwynedd and Ynys Môn and member of the Gwynedd and Ynys Mon Local Service Board
Betsi Cadwaladr University Health Board:
Andrew Jones, Executive Director of Public Health, BCUHB, Member of the BCUHB Board and Member of the Gwynedd and Mon Local Service Board
Hywel Meredydd-Davies, Independent member of BCUHB Board
Wyn Thomas Assistant Director, Community Partnership Development
Cilla Robinson, Associate Chief of Staff, Children and Young People CPG
Christine Lynes, Associate Chief of Staff, Primary, Community and Specialist Medicine CPG
Mark Couchman, Programme Manager, Mental Health and Learning Disabilities CPG
Pam Lewis, Director of Therapies and Clinical Support
Craig Barton, Senior Site Manager, Ysbyty Gwynedd
Dr Stephen McVicar, GP Locality Lead
Public Health Wales:
Sarah Andrews, Principal in Public Health