

Health and Wellbeing Board

18 January 2017

Joint Report of the Chair of the York, Easingwold and Selby Integration and Transformation Board and the Director of Adult Social Care, City of York Council.

Progress report from the Integration and Transformation Board Summary

- 1. Since the last meeting of the Health and Wellbeing Board, the work of the Integration and Transformation Board has led to:
 - Performance management actions in relation to main risks posed by the performance of the Better Care Fund
 - Partners agreeing a final version of a Joint Commissioning Strategy which commissioners will seek to adopt
 - Participation in a workshop to consider what an Accountable Care System could look like for the Vale of York.

Discussions have also taken place in relation to the Sustainability and Transformation Plan for Humber Coast and Vale, how we intend to develop a local plan and incorporate local health and social care priorities.

Background

2. The Integration and Transformation Board (ITB) has been set up to bring together local leaders to develop a vision and single transformation plan for the local footprint. This plan will inform the larger footprint Sustainability and Transformation Plan (STP) for Humber Coast and Vale and will reflect a bottom up approach to transformation. It takes a community focused, asset based approach – building upon people's strengths and abilities, rather than being reliant upon traditional statutory services. It is developing actions from the whole system and identifying projects that involve activities that directly interface with one another to

enable a focus on breaking down professional, organisational and cultural barriers that impede progress towards integration. The local plan will become an integral part of the Health and Wellbeing Board's (HWBB) vision and strategy and will both reflect and inform discussions at the larger geographical footprint.

Main/Key Issues to be considered

- 3. The Better Care Fund (BCF) Performance and Delivery Task Group continues to meet regularly. A number of risks are being managed and these are dealt with in more detail in a separate report on this agenda. However, it is important to note that it is anticipated that the plans are unlikely to achieve their targets.
- 4. Guidance in relation to preparing a BCF Plan for 2017/18 plan has been delayed and at the time of writing this report was still not available. Announcements in relation to the social care precept however indicated that while there would be no increase in overall funding for BCF in 2017/18, there will be an additional one off grant for social care Social Care Grant of approximately £700k for 17/18. Discussions have begun locally however starting with our reflections on the contribution of the BCF during the current and past years. The financial deficit of the Vale of York Clinical Commissioning Group (CCG) continues to provide pressure on the BCF and makes it all the more important to ensure that resources within the system are focused on transformation.
- 5. During the last twelve months discussions have repeatedly highlighted the need to grow the amount of pooled funding and jointly commission on a much bigger scale. Reaching agreement on a strategic approach to joint commissioning is a vital step to make this happen.
- 6. Additional independent support was appointed to draft a Joint Commissioning Strategy for the Vale of York, which should enable partners within the Vale of York to embark upon their service and financial planning for 2017/18 financial year, with a shared approach to commissioning. The final version of this Joint Commissioning Strategy is attached in Appendix A. It has been discussed several times with partners at the Integration and Transformation Board and received their endorsement at a meeting held on 13 December.

- 7. Some decision making and governance arrangements are fluid as discussions are still ongoing in relation to the HCV Sustainability and Transformation Plan. Consequently, the version presented to the board separates out governance which will be presented as an appendix in future and subject to revisions as required. Importantly however it is now possible to begin to consider practical measures to deliver a joint commissioning programme for 2017/18.
- 8. On 8 December 2016, a workshop took place to consider what an Accountable Care System could look like within the Vale of York. Strategic discussions about the concept and opportunities available through the development of a stronger partnership approach to system change have taken place for more than 12 months in a number of separate forums. However, this workshop, organised by Vale of York CCG, had very broad representation including York Teaching Hospital NHS Foundation Trust, CVS, Healthwatch, local authority commissioners from City of York and North Yorkshire County Councils, plus GPs / primary care representatives from across the patch.
- 9. The workshop was very positive and there is recognition of the need to build on positive relationships developed during the last twelve months through a range of partner discussions such as the Integration and Transformation Board, the Provider Alliance Board and the Vale of York Clinical Network A number of actions were proposed within the workshop including recommendations to establish an Accountable Care Partnership Board and set up three locality delivery boards for the Vale of York, with the potential for the ITB taking on the role for City of York Locality. Further work is needed to take forward suggestions and a more detailed report will be submitted to the board at a future meeting.
- 10. It is proposed that the next meeting of the Integration and Transformation Board scheduled to take place on 17 January, the day before this Board meets, is developed into a workshop. On this basis the intention is to invite a wider attendance that can further develop the outputs from the 8 December workshop. The ITB will review its progress and terms of reference at this meeting, so that it can be satisfied that it is organised to perform the role of a 'local delivery board'. This will build on work already done to identify shared, local priorities and develop a work plan. Based on our experience over the last ten months however we also need to ask what additional support agencies can offer.

We need to be explicit about our key challenges and in particular agree a definition of what we mean by co-production and engagement, and how this will be enacted. Given the timescales, a verbal update will be given to the Health and Wellbeing Board, so that any proposed changes in role and scope of the ITB can be subject to some initial consideration by the HWBB, ahead of a more detailed, formal report.

Consultation

11. The issues summarised in this report have been subject to discussion and agreement involving a wide range of partner organisations within York and North Yorkshire.

Options

12. There are no options provided in this report.

Strategic/Operational Plans

13. The plans produced by the ITB will build on the strategic plans of all partner organisations, including the CCG and City of York Council. The local delivery plan will also need to align to the Humber, Coast and Vale STP and the City of York's renewed Joint Health and Wellbeing Strategy.

Implications

14. The health and social care system in York is under severe pressure. The work of the Integration and Transformation Board is critical to developing approaches across the different parts of the system to develop sustainable solutions.

It is recognised that dedicated resource to support system change is critical to maintain momentum and provide much needed support to all partners.

Risk Management

15. The Integration and Transformation Board has provided a platform for local system leaders to meet and focus on shared issues. The next stage is to move to delivering system change at a local level within the broader Accountable Care System.

The local delivery board' will identify and lead breakthrough projects that will help break through organisational and professional barriers and bring about culture change. These projects probably represent the biggest risks to the system and to single agencies.

16. Integrated solutions, co-produced with local people, in a spirit of shared enterprise will provide a model of risk management on the largest scale. All partners need to recognise that decisions made in this forum will impact on the whole system, as will the consequences of success or failure.

Recommendations

- 17. The Health and Wellbeing Board are asked to:
 - I. Endorse the Joint Commissioning Strategy
 - II. Note the progress in relation to creating an Accountable Care System for the Vale of York

Reason: To keep the HWBB updated on progress being made by the Integration and Transformation Board'.

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Wards Affected:	All 🗹

For further information please contact the author of the report Background Papers:

None

Annexes

None

Glossary

BCF - Better Care Fund

CCG - NHS Vale of York Clinical Commissioning Group

HWBB - Health and Wellbeing Board

ITB - Integration and Transformation Board

JSNA – Joint Strategic Needs Assessment

NHS - National Health Service

NHSE - NHS England

STP – Sustainability and Transformation Plan