

<b>REPORT TITLE</b>	An update on the work of Healthy Wirral and the wider Cheshire and Merseyside Health and Care Partnership
<b>REPORT OF</b>	Cheshire and Merseyside Health and Care Partnership

**REPORT SUMMARY**

The Committee has asked for an update of the work of the Cheshire and Merseyside Health and Care Partnership. This report will bring the Committee up to date with the work of Healthy Wirral in Wirral, which is one of the nine place partnerships that make up the overall Cheshire and Merseyside Health and Care Partnership, as well as work taking place elsewhere.

**RECOMMENDATION/S**

To note the work of the Healthy Wirral partnership and the Cheshire and Merseyside Health and Care Partnership.

## **1.0 REASON/S FOR RECOMMENDATION/S**

n/a

## **2.0 OTHER OPTIONS CONSIDERED**

n/a

## **3.0 BACKGROUND INFORMATION**

Some highlights of the work of the Health and Care Partnership include:

### **1. Pop up' community birthing centre**

Expectant mums in Wirral now have access to a new team of midwives dedicated to women choosing to have their babies at home or in the 'pop up' birth unit opening at Seacombe Children's Centre.

The unit will encourage women with a low risk of complications (something established clinically during discussions between a woman and her midwife) to give birth in a non-medicalised setting where wrap around services are also available to support families postnatally and beyond.

As the first birthing centre nationally to launch in a multi-purpose community setting like a children's centre, the new facility will provide key insight into the cultural effectiveness and uptake of more community-focused birthing options.

### **2. Headache pathway reduces referrals by 20%**

The Walton Centre and Neuro Network headache pathway for primary care was designed to support and empower front-line GPs to diagnose and treat most patients with headache or simple migraine.

The aim of the new pathway was to help reduce referrals to secondary care and attendances at A&E for severe headaches, which were growing at five thousand a year. The results have shown a 20% drop in referrals over one year. A pathway for use in acute hospitals has also been developed and launched

### **3. Primary Care**

General practice and wider primary care is a fundamental element of the Cheshire & Merseyside Health & Care Partnership's strategy for improving health and outcomes and the services delivered to our population.

The Health & Care Partnership and NHS England (Cheshire and Merseyside) created a £4m Primary Care Network Development Fund for 2018/19 to support the development and implementation of Primary Care Networks across the area.

Primary Care Networks are groups of general practices who will join together to deliver services across a wider footprint. This would allow the network to share services like community nursing, mental health, and clinical pharmacy teams, expand diagnostic facilities, and pool responsibility for urgent care and extended access.

### **4. Transforming Care Programme**

Cheshire and Merseyside Transforming Care Partnership (TCP) is aiming to make change across the whole system to the way services for people with learning disabilities and/ or autism are delivered to help people live in homes, not hospitals and improve people's health, quality of care and quality of life.

This will mean that fewer people in Cheshire and Merseyside will need to go into hospital for their care. To do this we are making sure that services in the community are better able to meet people's needs, particular those who might need additional support. For people who do need to go into hospital though we want to make sure that they are as close to where they live as possible

### **5. Estates Strategy**

Our Partnership has developed a five year Estates Strategy setting out how the health and care estate across Cheshire and Merseyside needs to develop to keep pace with the transformation in how care is delivered in each of the nine places that make up our area.

NHS buildings in Cheshire and Merseyside account for 1.6 million square metres of floor space and cost nearly £500 million a year to run. The Estates Strategy sets out how the Partnership will make the best use of its assets over the next few years.

The priority will be to ensure that our estate is configured and used appropriately to support more care closer to home – whether that's providing facilities to neighbourhood teams to work out of or places that allow people to be treated round the corner from where they live.

Similarly, as we concentrate more care outside of hospital, this will have implications for how acute hospitals and also mental health providers use the buildings they own to provide care. And we also want to make sure that we run our estate as efficiently as possible, making the most of the assets we own but also finding ways of releasing more funds to invest in patient care.

Finally, we want to reduce the backlog of repairs by 35%, making sure more patients are treated in modernised facilities.

## **6. Launch of Digit@ll - Cheshire and Merseyside Digital Roadmap**

Following great engagement and feedback across Cheshire and Merseyside, on Thursday 5 July we launched our single digital roadmap for the C&M Partnership.

There are many examples of great work underway across our geography. Digit@ll is the latest example of how we are pooling our expertise and 'can do' attitude to continue to deliver high quality care for all. Cheshire and Merseyside is already one of the best places in the country for the way we are harnessing technology to improve patient care. But we want to go even further.

For our frail and elderly, digital will have a critical role in supporting diverse teams of professionals to treat more patients in or closer to home, and supporting more patients to self-care.

And for the wider population, used to booking anything from holidays to hair appointments online, we want to meet their expectations of health and care services that keep pace with

modern life, providing more support and care on demand and online to fit in with their increasingly busy lives.

Finally, by reducing variation and making sure all our places are making the best use of digital technology in the day to day care they deliver, we can reduce costs, improve standards and deliver the best possible care.

Our relationships, collaboration and achievements to date are significant and we are excited to take these to the next level over the next five years, working together to support our population to live longer, healthier lives.

## **7. Workforce Programme**

There have been significant improvements in the NHS and social care over the past 15 years in Cheshire and Merseyside. Survival from cancer and heart disease has increased, waits for some treatments are shorter and the quality of care is higher.

More people are cared for in their homes and extra support has been provided to families with children. These gains have been achieved thanks to the commitment of health and social care staff.

But if we are to continue to deliver high quality care for local people we need the right number of staff with the right skills in the right roles. These are the challenges the Partnership's Workforce programme has set itself and all health and care organisations in Cheshire and Merseyside.

Getting our workforce fit for purpose is also good for the wider economy. We employ about 70,000 staff in the NHS and 75,000 staff in care across Cheshire and Merseyside. This is around 15% of all jobs in the region, and that's before you include our GPs and Primary Care staff. We do have some real challenges. For example, the number of district nurses has dropped by a quarter since 2012 and the number of learning disability nurses has dropped by more than a third.

We have a high turnover of staff with more choosing to leave health and social care jobs than ever before, but also staff moving between NHS organisations. We will support our staff to get the most rewarding career across health and care in Cheshire and Merseyside by working together .

Demand currently exceeds supply. Up to 60% of graduates who study in Cheshire and Merseyside are retained in the area post qualification. At the same time we have an ageing workforce – more than half of staff are over the age of 40.

The workforce programme is developing a strategy for the next 5 years focusing on the following areas:

- Creating a sustainable supply of staff – ideally from within our communities and supporting local people to have a career in health and care .
- Working with schools and colleges to encourage young people to consider a career in health and care
- Ensuring that we look after our staff – with a real focus on keeping our staff well , feeling valued and having the skills and equipment they need .
- Promoting Cheshire and Merseyside as a great place to live and work
- Using digital technology
- Ensuring that we have high quality clinical and non clinical leaders of the future.

## **8. Prevention framework launched across Cheshire and Merseyside**

Recognising the need to take a population health approach and embed prevention in everything we do, the Partnership asked the Prevention Board to consider the development of a framework that would consider evidence based practice and support the work happening locally.

The 'Population Framework' sets out evidence based guidelines that partners can use to create a transformational and sustainable shift in the health and wellbeing of the Cheshire and Merseyside population. The framework has been co-produced with Public Health England, the NHS and the voluntary and third sector.

Recognising that respective systems are at different stages of development the framework is a helpful signpost and can be adapted and adopted to suit local circumstances.

The framework provides practical suggestions for each Place Based Care System for working on population health with:

- Local system leaders
- Local communities
- General Practices and/or Primary Care Hubs
- Local tertiary and acute providers.

## 9. Transformation Fund

To accelerate the pace at which each of the nine places across Cheshire and Merseyside can transform the way in which health and care is delivered locally, they can access a Transformation Fund over the next three years.

Places submitted their plans for 2018/19 on how they would invest their share of the fund to improve the quality of care, improve the health of their population and also deliver care more efficiently.

Wirral was been successful in securing funding to enhance its 'Neighbourhood' teams with staff who will be working out ways of improving how services can be delivered. Their initial focus will be reducing unplanned hospital admissions amongst people over the age of 50 by 12% during 2018/19, creating significant savings for the NHS.

Places have already begun to submit their plans for 2018/19 on how they would invest their share of the fund to improve the quality of care, improve the health of their population and also deliver care more efficiently. Each place has been provided with an initial £100,000 this year to help their work, and in June's bulletin there will be more detail on place plans as they emerge.

Over the last 12 months, the work of the Cheshire and Merseyside Health and Care Partnership in Wirral, through the Healthy Wirral Partnership, has included the following:

Programmes	Achieved in 2018/19	Planned for 2019/20
Place Programme Development and Governance	<ul style="list-style-type: none"><li>• Programme Structure Establishment</li><li>• Appointment of Independent Chair and Programme Team</li><li>• MOU for <i>Healthy Wirral</i> Partners</li></ul>	<ul style="list-style-type: none"><li>• Review and implementation of revised governance</li><li>• Enhancing workforce and public communication and</li></ul>

	<ul style="list-style-type: none"> <li>and sign up to CEP-Lite</li> <li>• Programme structure, executive sponsorship and system leadership</li> </ul>	engagement with the Place Programme
Integration of Commissioning	<ul style="list-style-type: none"> <li>• Establishment of WHACC</li> <li>• Integrated Commissioning Board</li> <li>• Pooled Budgets</li> </ul>	<ul style="list-style-type: none"> <li>• Consolidation of arrangements and further work with elected members.</li> </ul>
Integration of Health and Care Provision	<ul style="list-style-type: none"> <li>• Embedding of Adult Social Care into Community Trust</li> <li>• Transfer of All Age Disability Services into Mental Health Trust</li> </ul>	<ul style="list-style-type: none"> <li>• Further embedding of integrated health and care teams linked to the neighbourhood target operating model</li> </ul>
Primary Programme Development	<ul style="list-style-type: none"> <li>• Planned Care <ul style="list-style-type: none"> <li>• Implementation of new MSK pathway</li> <li>• Engagement of Right Care in programme priority mapping</li> <li>• Heart Failure re-design</li> </ul> </li> <li>• Urgent Care <ul style="list-style-type: none"> <li>• Design process for urgent care transformation</li> <li>• Extensive Public Consultation on model options</li> <li>• Capacity and Demand Modelling</li> <li>• Establishment and Delivery of Tele-triage for all Wirral Care Homes</li> <li>• Review of Single Integrated Gateway</li> </ul> </li> <li>• Mental Health <ul style="list-style-type: none"> <li>• Procurement of new primary mental health and IAPT service</li> </ul> </li> <li>• Learning Disabilities <ul style="list-style-type: none"> <li>• Delivery of an Independence based care and support model including housing and employment support</li> <li>• Delivery of significant financial efficiency savings</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• System implementation of NHS Operating Plan requirements for planned and emergency care elements including cancer, mental health, learning disabilities and RTT</li> <li>• Additional Planned Care Actions including: <ul style="list-style-type: none"> <li>• Respiratory Re-design and transformation</li> <li>• Falls Pathway redesign</li> <li>• CVD Redesign</li> </ul> </li> <li>• Additional Urgent Care actions <ul style="list-style-type: none"> <li>• Agreement of final model and implementation of Urgent Care transformation programme</li> </ul> </li> </ul>
Neighbourhood Development	<ul style="list-style-type: none"> <li>• Establishment of multi-agency Neighbourhood teams with the appointment of Neighbourhood Coordinators</li> <li>• Creation of detailed neighbourhood population profiles to support decision making and prioritisation</li> <li>• Neighbourhood Plans established and being implemented, supported by transformation resources</li> <li>• Significant work on a shared target operating model for neighbourhoods</li> <li>• Building of system partnerships to support neighbourhoods, including third sector, acute, community, medicines optimisation and mental health provider involvement</li> </ul>	<ul style="list-style-type: none"> <li>• Implementation of Target Operating Model</li> <li>• Further establishment and embedding of neighbourhood teams</li> <li>• Third Sector engagement pathway development to support frail and vulnerable groups, and focus on preventative support and social prescribing</li> </ul>
Workforce & Leadership	<ul style="list-style-type: none"> <li>• Establishment of integrated workforce strategy team covering statutory health and care providers, independent care providers, third</li> </ul>	<ul style="list-style-type: none"> <li>• System implementation of NHS Operating Plan requirements for Primary Care Networks</li> <li>• Implementation of the Aligning</li> </ul>



	<p>sector and education providers for Wirral</p> <ul style="list-style-type: none"> <li>• Identification of key strategic priorities</li> <li>• Successful bid to Local Workforce Advisory Board (LWAB) to implement an aligning capabilities model of people and organisational development for Wirral, working in partnership with Cheshire West Place colleagues</li> <li>• Engagement with NW Leadership Academy to deliver a Neighbourhood Leadership Development programme to support integrated system leadership and co-production, and develop leadership skillset for neighbourhood leaders</li> </ul>	<p>Capability Model to support the development of Neighbourhood Workforce, People and Organisational planning</p> <ul style="list-style-type: none"> <li>• Delivery of Leadership Programme</li> </ul>
Medicines Optimisation	<ul style="list-style-type: none"> <li>• Establishment of Wirral –wide Medicines Optimisation Programme</li> <li>• Integrated Neighbourhood Pharmacist Programme delivering benefits of integrated working with GP Practices</li> <li>• Bio-similars programme delivering significant system cost benefits</li> </ul>	<ul style="list-style-type: none"> <li>• Further integration of Medicines Optimisation for Wirral</li> <li>• Extension of Neighbourhood Pharmacist Programme</li> <li>• Identification of further Bio-similars efficiencies</li> </ul>
Population Health Management	<ul style="list-style-type: none"> <li>• Population Health Intelligence Governance establishment. Population Health Intelligence Group establishing Wirral Population Health Strategy. System workshop held to identify the key strategic questions</li> <li>• Work to develop integrated analytics and business intelligence for Wirral, including a comprehensive skills audit.</li> <li>• Implementation of Health Information Exchange (HIE) allowing clinician viewing of live clinical information across providers</li> <li>• Population Health Management System (Wirral Care Record) integration, standardisation and merging of data for primary and secondary care, including validation and testing of data.</li> <li>• Development and implementation of the five initial registries(Adult and Paediatric Diabetes, Adult and Paediatric Asthma and COPD) together with two additional registries for frailty and end of life.</li> </ul>	<ul style="list-style-type: none"> <li>• Further information integration into the intelligence system to expand scope of Wirral Care Record and HIE</li> <li>• Wider adoption of Wirral Care Record across system allowing the embedding of population health registries supporting the care management of specific cohorts of patients and the development of new models of care. Practice registries will allow the identification of gaps in care and clinical benchmarking</li> <li>• Integration of Wirral intelligence and analytics offer</li> <li>• Completion of Wirral Population Health Intelligence Strategy</li> </ul>

## 4.0 FINANCIAL IMPLICATIONS

n/a

## 5.0 LEGAL IMPLICATIONS

n/a

## 6.0 RESOURCE IMPLICATIONS: ICT, STAFFING AND ASSETS

n/a

## 7.0 RELEVANT RISKS

n/a

## 8.0 ENGAGEMENT/CONSULTATION

n/a

## 9.0 EQUALITY IMPLICATIONS

No because there is no relevance to equality.

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## APPENDICES

## REFERENCE MATERIAL

## SUBJECT HISTORY (last 3 years)

Council Meeting	Date