

SLOUGH BOROUGH COUNCIL

Report to: Slough Wellbeing Board **Date:** 14th March 2022
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Ward(s): All

PART I **FOR INFORMATION**

UPDATE ON PRIORITY TWO - INTEGRATION. HEALTH AND SOCIAL CARE PARTNERSHIP BOARD

1. Purpose of report

To update the Board on the progress of work on integration and the delivery of the Health and Social Care Plan. The Plan has been co-developed between Slough Borough Council and Frimley CCG together with partners within the Health and Social Care Partnership. It outlines our agreed, shared plan for further integration in 2022.

2. Recommendation(s)/proposed action

The Board is requested to note the content of the report and the activity and progress in integrating health and social care

3. The Slough joint wellbeing strategy, the JSNA and the Five year plan

3a. Slough wellbeing strategy priorities

Integration is priority two within the Slough Wellbeing Strategy 2020-2025. The strategic ambitions are to:

- Increase healthy life expectancy in Slough.
- Increase the proportion of people living independently at home, and decrease the proportion living in care homes.
- Increase the number of people who are managing their own care and support needs
- Reduce the number of attendances and admissions to hospital, and the length of these stays. Reduce delayed transfers of care.

To achieve these ambitions, the Health and Social Care Partnership board will:

- Develop a place-based health and care strategy, to align the current health and social care services.
- Build on the work of the Slough Better Care Fund, to increase the contributions from health and social care to the pooled budget.
- Encourage health and social care partners to work together to support and maintain providers, and promote the use of collaborative commissioning of services in Slough

- Continue to work with our care users to ensure that co-production and co-design are at the heart of all that we do.
- Work to reduce the impact of COVID-19 on the physical and mental health of people in Slough

The Health and Social Care Partnership together with the Place Based Committee have now developed a place-based Health and Social Care Plan setting out our shared priorities and next steps in our journey towards integration.

3b. Five year plan outcomes

The work of the Health and Social Care Partnership and Place based Committee is to directly support delivery of outcome 2 of the five-year plan:

- Outcome 2: Our people will be healthier and manage their own care needs

4. Other implications

(a) Financial

Integration of health and social care services not only a more personalised approach around individual needs and improved outcomes but also bring financial benefits from avoiding duplication between services and agencies involved in care of the person. Through our integrated care approach we are now able to use health and social care analytical data to identify risks and precursors to frailty and life-limiting health conditions to enable a proactive, targeted approach and intervention that will keep people healthier and living independently for longer.

We already have a pooled budget through which to jointly plan, commission and delivery integrated care. Whilst this is currently still a small proportion of combined spend at place level our ambition is to increase this in future.

(b) Risk management

Risks associated with the delivery of the Health and Social Care Plan will be monitored by the Health and Social Care Partnership and Place Based Committee. A risk register will be developed and overseen by the committee. Individual projects within the work programme will also develop and manage this own risk registers.

(c) Human rights act and other legal implications

There are no direct Human Rights Act Implications. The legislation for health and social care services to pool budgets is within Section 75 of the Health and Social Care Act 2006.

(d) Equalities impact assessment

There is no requirement to complete an Equalities Impact Assessment (EIA) in relation to this report. EHIA's will be completed for specific aspects of the integration programme and projects as required. One of main priorities in the Health and Social Care Plan is to address inequalities in our population.

(e) Workforce

There are workforce implications for the future as we further develop our model of integration for Health and Social Care. Currently we have multi-disciplinary teams working closely together who are employed by different partner organisations. This collaboration and cooperation will over time lead towards new ways of working in partnership with others which will be aligned together with other significant change management programmes such as that within the Frimley Integrated Care System workforce development programme and the newly emerging primary care networks.

5. **Supporting information**

There are number of achievements already to date which are outlined in the plan:

- Establishing community maternity hubs
- Establishing Mental Health Integrated Community Service (MHICS)
- Establishing the recovery college
- Providing some GP direct referrals for Long Term Conditions
- Establishing Locality Access Points for integrated multi-disciplinary decision-making, and supporting these through Connected Care
- Implementing Home First to improve recovery out of a hospital setting

In this last quarter:

Better Care Fund - Produced and signed off our Better Care Fund programme plan for 2021-22, setting shared ambitions for improvement against national BCF metrics and supported by a pooled budget of over £15m for delivery of integrated care in Slough.

Anticipatory Care Planning – Using Connected Care and the insights available to improve our population health management we can now identify and target precursors to poor health, frailty and life-limiting conditions. Slough is currently recruiting to a Frailty Practitioner role to identify and carry out early screening and assessment of people with mild/moderate frailty and pilot this ACP approach.

Ageing Well programme – as part of the ICS Ageing Well Programme we are delivering improvements at place, including the Urgent Care 2 hours response (currently achieving this response time currently in 100% of cases, exceeding the national target of 70%). We also have a local Care Home project group to support delivery of the Enhanced Healthcare in Care Homes framework.

Improving access to care

- Developed plans for the delivery of integrated care hub for Slough
- Improved access to primary care expanding capacity in evenings, weekends and with out of hours services as well as centralising telephony and online services to dramatically reduce call waits from 40 to less than 7 minutes greatly improving access.
- Pharmacy consultation service allowing practices to directly refer patients to local pharmacy for minor illness and ailments.

MICHS mental health services

- Further planned roll out of the MICHS model across all the Primary Care Networks
- Pilot underway of Mental Health dual diagnosis worker as part of our Slough Homeless Outreach Liaison team providing support to homeless

Neighbourhood and community work with the Primary Care networks

Building on the work done within the Stronger Neighbourhoods and Community Development teams there is now work underway bringing this together with the PCNs across Slough enabling them to connect and engage with their local communities whilst developing and supporting population health management approaches at PCN level.

Reducing health inequalities –

- Established Health Inequalities Board building on the learning of the BAME programme on impact of covid
- Supporting project on blood pressure monitoring and hypertension in at risk groups
- Covid Wellbeing Champions programme is working with Slough CVS and volunteer network to further reach into communities to increase vaccination take and support with positive health messaging
- Mobile Family Health Clinic to reach vulnerable young families who find it difficult to access primary care and health visiting services providing nursing care support, check-ups along with help and advice.

Achieving social value

Preparations are underway for a HACT (Housing Associations Charitable Trust) workshop being held in March to look at how we will collectively calculate and measure the impact of our integration and work with local communities to ensure we are achieving broader social value.

6. Comments of other committees

This report has not been shared with other committees

7. Conclusion

The board is requested to note to the content and progress in the last quarter

8. Background papers

'1' - Health and Social Care Plan