

**Report of: Chief Officer Access and Care, Adult Social Care/ Executive Director of Operations, Leeds Community Healthcare Trust**

**Report to** Outer East Area Committee

**Date:** 10<sup>th</sup> December 2013

**Subject:** Update on Health and Social Care Integration in the South East

Are specific electoral Wards affected?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<b>If relevant, name(s) of Ward(s):</b> Garforth and Swillington; Kippax and Methley		
Are there implications for equality and diversity and cohesion and integration?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, Access to Information Procedure Rule number:		
Appendix number:		

**Summary of main issues**

1. Integrated health and social care teams have been developing in Leeds for around 18 months
2. Due to the need for Leeds Community Healthcare to undertake internal transformation work, an opportunity has been presented to work collaboratively with Adult Social care to shape these developments in line with the model for integrated services
3. These developments are being tested in South East Leeds – specifically in the neighbourhood teams of Hunslet, Kippax, Middleton and Beeston
4. The South East Leeds Initiative will offer the opportunity to further develop more localised working around GP practice populations, and the use of hot-desking and flexible use of facilities will promote locality working around the natural communities of the locality

**Recommendations**

5. Outer East Local Area Committee is asked to note the continued progress in developing integrated health and social care services in Leeds, endorse the direction of travel in developing and delivering improvements in how health and social care services are provided to Leeds residents, to note the particular emphasis currently

being given to the developments in the South East of the city and offer their support to these developments

## **1 Purpose of this report**

- 1.1 The purpose of this report is to update the Area Committee of the continued developments towards integrated working across health and social care
- 1.2 There is specific reference to the developments in the South East area – the neighbourhood teams of Kippax, Hunslet, Beeston and Middleton – as these are testing parts of the model for integrated working described in the paper brought to the Area Committee earlier this year

## **2 Background information**

- 2.1 Integrated health and social care teams have been developing in Leeds for around 18 months. While this is a national direction of travel, endorsed by the Health Act 2012 and reiterated in the Care Bill, it is a model that been signed up to by the senior leaders in the Local Authority and across Health within Leeds.
- 2.2 The origin for the South East Initiative (SEI) came from Leeds Community Healthcare's (LCH) internal transformation work, and specifically the need to create Community Nursing and Community Therapy teams. As these proposals were shared, an opportunity was identified to expand the remit to include elements of LCH/ Adult Social Care (ASC) integration, and enable ASC to work jointly with LCH to shape the developments together.
- 2.3 This initiative will enable detailed data and information to be captured regarding activity and outcomes, in addition to that gathered by analysts to date. It will also enable staff and managers to work together, and gain a shared understanding of future models, caseloads etc. Finally, it will enable certain specific elements of service delivery to be tested and evaluated. This will all support the development of the model for integrated working, and how that model can be rolled out citywide from 2014/15

## **3 Main issues**

- 3.1 The South East Initiative is designed to test out how ASC and LCH move from the current configuration of teams and ways of working to those outlined in the model for integrated services. This initiative has a number of elements:
  - Rapid Response. Testing the assumption that rapid response can be delivered most effectively at a neighbourhood level
  - Out of Hours. Developing a model for Out of Hours services that works with the proposed model for integrated working

- Neighbourhood Teams. Designing and shaping a model of neighbourhood community nursing, community therapy and community social work that can be adopted across the City
- Case Management. Developing a more integrated approach to case management to free up capacity to support complex cases.
- Neighbourhood Rehabilitation Teams – encompassing Intermediate Care Teams (LCH) and Reablement teams (ASC). Designing and shaping a model of neighbourhood rehabilitation teams that can be adopted across the city.

3.2 A further key part of this model is the development of neighbourhood nursing, therapy and social work services wrapped around GP practice populations. During this testing out phase, workers will be encouraged to utilise hot-desking facilities across the estate within the South East area, to enable more local links to be developed within the natural communities of the locality. This will be used to inform a city wide review of neighbourhood boundaries aimed at ensuring all teams are working to an appropriate population that maximises the benefits of integrated working.

All of the above Workstreams are being coproduced with staff and the model is being built using the design principles that were developed by people using health and social care services. We will use existing governance structures and reference groups throughout this work to ensure continued engagement with partners including service users/patients.

## **4 Corporate Considerations**

### **4.1 Consultation and Engagement**

4.1.1 Staff are being fully involved in the developments, and work is on-going with Trade Union representatives across health and social care

4.1.2 Service users and carers have been involved in the development of the integrated service model. There is a patient and public reference group established and links through to existing forums to discuss proposals. Impact on people that use our services is one of the areas of the project that is evaluated externally. Work will commence in January 2014 with a group of older people who have been trained to conduct this evaluation. They will be talking to people that have been supported by integrated teams to get their feedback. This will be evaluated by the older people and fed back directly to the neighbourhood teams so that we can learn what is working and what needs to change and tailor the model accordingly.

### **4.2 Equality and Diversity / Cohesion and Integration**

4.2.1 The model being developed will have a consistent Citywide approach with flexibility in the system to be responsive to local needs. For example work with

Neighbourhood Networks is helping to build strong local relationships and understand the supports available within a local area.

- 4.2.2 An Equality Impact Assessment will be undertaken as part of this programme of work.

### **4.3 Council policies and City Priorities**

- 4.3.1 This proposal is about working more effectively in partnership with other organisations to improve outcomes for the citizens of Leeds and is in line with the City Priority Plan 2011 – 2015.

### **4.4 Resources and value for money**

- 4.4.1 The integrated care pathways model aims to develop efficient streamlined services. These new pathways will remove duplication in management and in service delivery. This will improve the experience for service users in accessing a single service that can meet a range of support needs whilst maximising use of resources.

### **4.5 Legal Implications, Access to Information and Call In**

- 4.5.1 There are no specific legal implications from this report
- 4.5.2 This report is not eligible for call in

### **4.6 Risk Management**

- 4.6.1 Formal project management methodologies are being applied to this work and project assurance is provided by the NHS Leeds Programme Management Office on behalf of the City Transformation Board. Governance arrangements are in place and all elements of project delivery report into the Integrated Health and Social Care Board which meets on a monthly basis and has representation from all stakeholder groups.

## **5 Conclusions**

- 5.1 The development of integrated health and social care teams continues apace. Alongside this development is the need for LCH to internally streamline and reconfigure its services. The SEI offers an opportunity for LCH and ASC to work together to develop a model of integrated service that meets the needs of the citizens of Leeds

- 5.2 The encouragement of flexible use of the various health and social care estate and hot-desking will further develop the opportunity for more local links within the natural communities of the locality - supporting the development of relationships with key community groups and the GP practices and increasing knowledge of available local support and universal services.

## **6 Recommendations**

- 6.1 Outer East Area Committee is asked to note the continued progress in developing integrated health and social care services in Leeds, endorse the direction of travel in developing and delivering improvements in how health and social care services are provided to Leeds residents, to note the particular emphasis currently being given to the developments in the South East of the city and offer their support to these developments

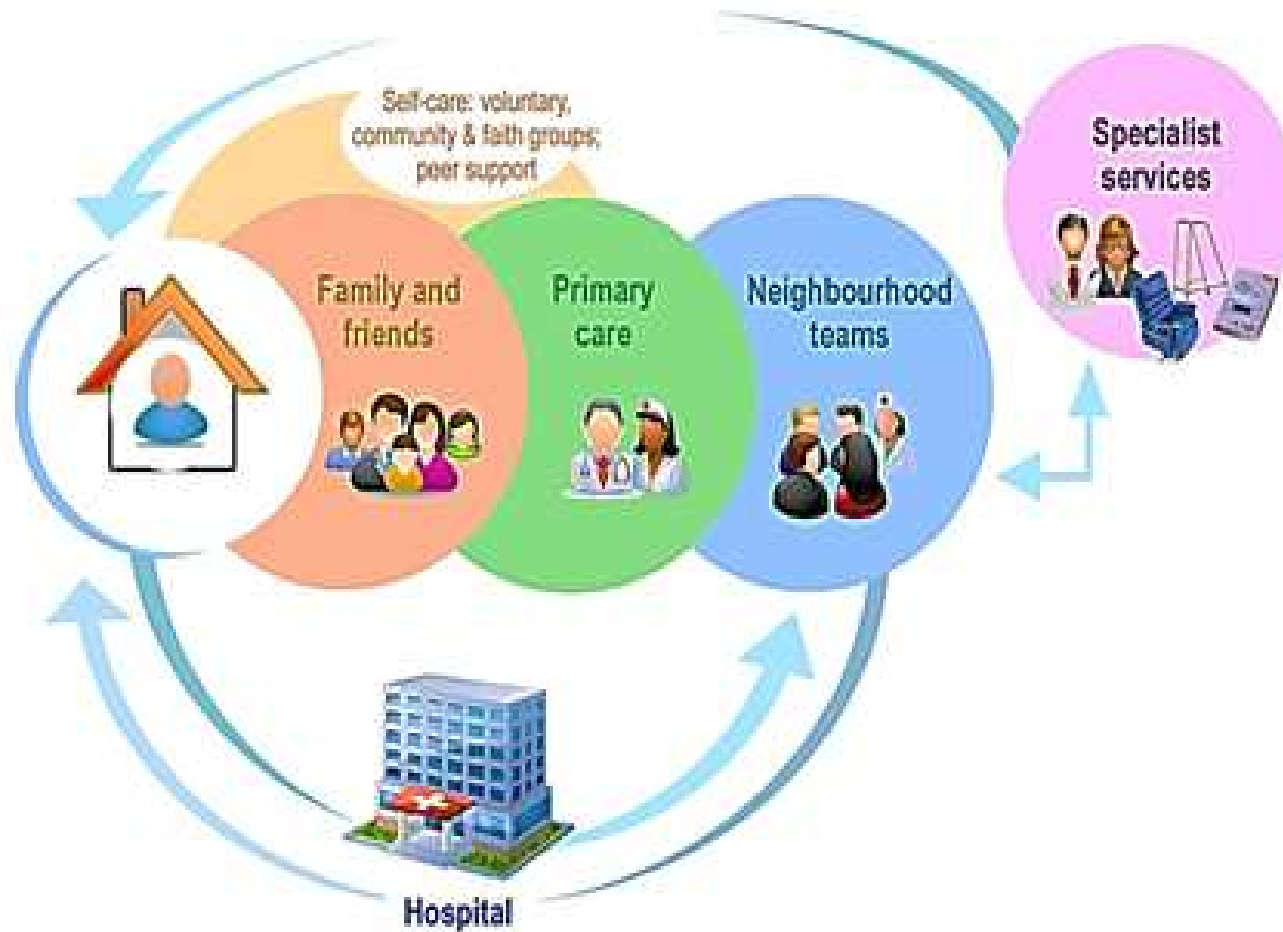
## **7 Background documents<sup>1</sup>**

- 7.1 There are no background documents to this paper

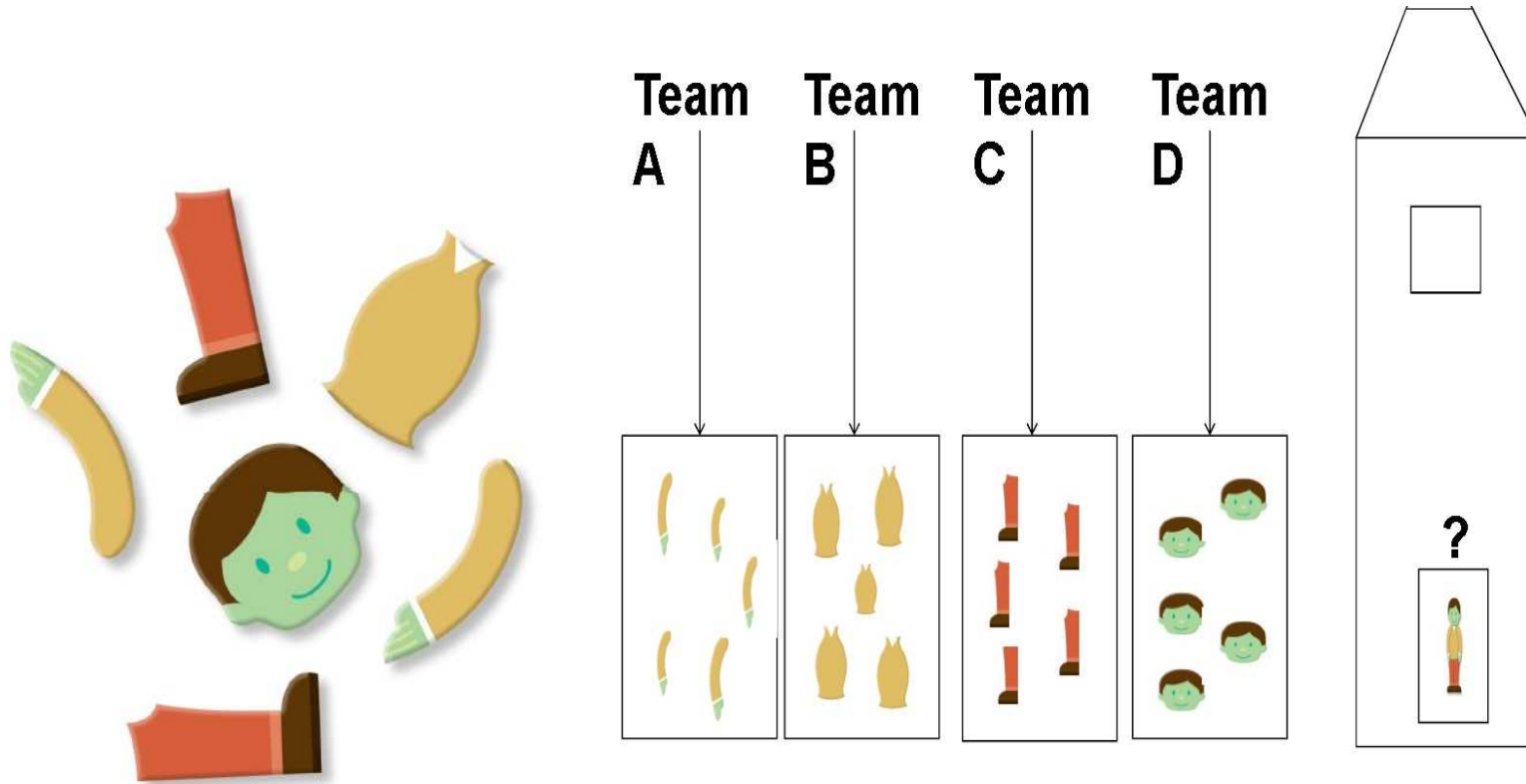
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<sup>1</sup> The background documents listed in this section are available for inspection on request for a period of four years following the date of the relevant meeting. Accordingly this list does not include documents containing exempt or confidential information, or any published works. Requests to inspect any background documents should be submitted to the report author.

# Vision for Integrated Services in Leeds



# Current system in the NHS – bits and pieces of people



**Integrated system sees the whole person**

