

## Appendix B - Left Shift Blueprint Summary Document

### The aim of the Left Shift Blueprint

Leeds is a fantastic city. We have great people, great institutions, great parks and great opportunities. In terms of health services, we have some of the best services in England in terms of primary care, community, mental health and hospital services, and a wealth of local voluntary organisations which offer incredible support to thousands of people. We have great schools and world class universities, and a substantially positive economic outlook.

*'Health Inequalities are the unfair and avoidable differences in health across the population and different groups within society' (NHS England)*

And yet, our health outcomes are often not as good as the England average, and we have significant and growing inequalities within the city.

To address this, partners in the city have already committed to achieve the Health and Wellbeing Strategy ambition that – ***Leeds will be a caring city for people of all ages, where people who are the poorest improve their health the fastest***

Health inequalities were already worsening before Coronavirus and the shock waves from the pandemic are now impacting upon families and communities, on mental and physical health even more. Although, as a system there are areas we have got things right and are making a difference. We would like to learn from these things and do more of them in a systematic way through the Left Shift Blueprint.

We know that addressing health inequalities is no longer about doing the 'extra things' but about a focus on inequalities in everything we do, applying the totality of resources available to us as a Health system.

The Left Shift Blueprint describes how we want the health of the population to change over the next five to ten years if as a whole system of providers we focus on achieving our Health and Wellbeing Strategy ambition and how through working as a health and care system we plan to do it. These areas of change are also things that people in Leeds tell us are important to them. As a Leeds system we have committed to focusing our resources, financial and non-financial on achieving these things.

### The objectives of the Left Shift Blueprint

The left shift blueprint aims to improve the health of the population of Leeds in the following ways:

- Focusing more of our resources and attention on supporting people to live, age and die well.
- Ensuring our services and resources are focused on reducing health inequalities.
- Investing more resources in prevention and personalised proactive care – often (but not always) resulting in more activity and care taking place in community settings including people's homes
- Ensuring that services work with people as equal partners in their care, and services are delivered in a way that is focused on what matters to people

The Left Shift Blueprint also goes hand in hand with our ‘Hospitals of the Future’ Programme, building two state-of-the-art new hospital buildings at Leeds General Infirmary.

### Our city wide ambitions

The Left Shift Blueprint ambitions are set out through our Strategic Indicators. For each of these indicators, where we can measure it, we aim to be as good, if not better, than the England average and to reduce the health inequalities between Leeds and deprived Leeds by 10%.

We are looking at our Strategic Indicators in three different ways:

**1 – Health Outcome Ambitions** - These are longer term indicators that we are looking at over a 10 year period.

**2 – System Activity Metrics:** These indicators will provide a more immediate view of impact through the Leeds Data Model

**3 – Quality Experience Measures:** These indicators will provide a view of peoples’ experience of services and moving between services

These indicators can be seen in the table below:

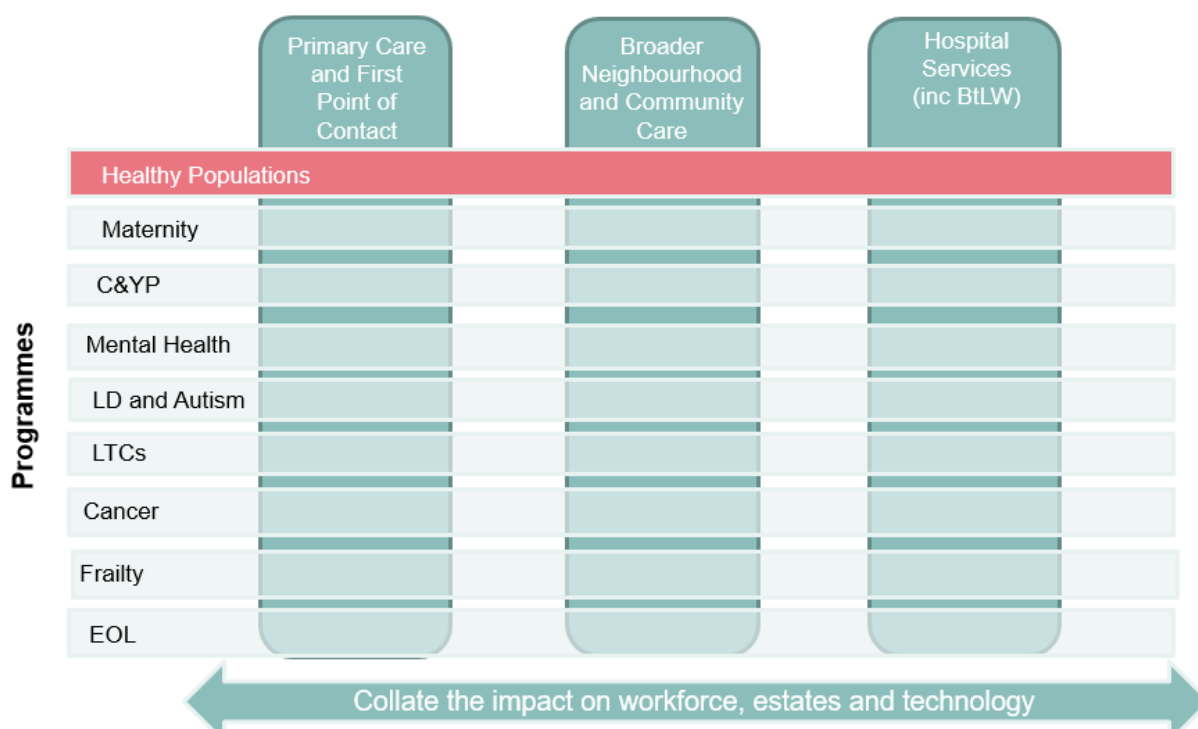
Health Outcome Ambitions	System Activity Metrics	Quality Experience Measures
<ul style="list-style-type: none"> <li>• Improve infant mortality</li> <li>• Reduce weight in 10-11 year olds</li> <li>• Improve healthy life expectancy</li> <li>• Reduce the rate of deaths under 75 from CVD</li> <li>• Reduce the rate of deaths under 75 from Cancer</li> <li>• Reduce the rate of death under 75 from alcoholic liver disease</li> <li>• Reduce the rate of death under 75 from repertory disease</li> <li>• Reduce the potential years of life lost due to avoidable causes</li> <li>• Reduce premature mortality for people with SMI and LD</li> <li>• Reduce the suicide rate</li> <li>• Increase the proportion of people who experience a good death</li> </ul>	<ul style="list-style-type: none"> <li>• Reduce the proportion of adults with a BMI over 25</li> <li>• Reduce the proportion of adults who smoke</li> <li>• Increase the proportion of people being cared for in primary and community services</li> <li>• Increase expenditure on the 3rd Sector</li> <li>• Reduce the rate of growth in non-elective bed days</li> <li>• Reduce the rate of growth in A&amp;E attendances</li> <li>• Reduce the proportion of face to face appointments in hospital</li> </ul>	<ul style="list-style-type: none"> <li>• Experience of Primary Care</li> <li>• Experience of Community Services (Leeds Community Healthcare)</li> <li>• Experience of mental health Services (Leeds and York Partnership NHS Foundation Trust)</li> <li>• Experience of hospital Services (Leeds Teaching Hospital Trust) Inpatient</li> <li>• Experience of hospital Services (Leeds Teaching Hospital Trust) Outpatient</li> <li>• Person centred coordinated care experience</li> </ul>

### Our programmes of work

The change on the ground that will contribute towards achieving our Strategic Indicators will be driven through our nine programmes of work and across three settings.

The programme structure can be seen below:

**Settings (all include both routine and same day response)**



Our programmes are also aligned to and working with the West Yorkshire and Harrogate ICS, therefore some commissioning decisions may well be made on a wider footprint. It is clear that purely targeting NHS resources towards meeting our strategic indicators will not alone mean that they will be achieved. It will only be through galvanising the system around achieving them through our boards, groups, communities and harnessing our collective effort around improving not only health but the wider determinants of health that they will be met.

Each programme also has a set of programme indicators and priorities for delivery, each of which in turn will contribute towards achieving our strategic indicators. These have been developed through the respective programme boards reflecting the things that they know matter most to people. A summary of the aims of each programme can be found below:

Programme	Programme Overview	Challenges the programme is looking to address
Healthy Populations	The Healthy Populations Programme will support the other programmes in helping people stay well. It will also oversee a number of other city-wide programmes that will support people to stay well.	<ul style="list-style-type: none"> <li>Supporting a reduction in health inequalities. Prior to the pandemic there were a 20% of our population living in the 10% most deprived areas nationally and this proportion had grown over the last decade.</li> <li>We expect the situation to have worsened as a result of the 2020/21 pandemic.</li> </ul>
Maternity	The Maternity programme covers services available for people in Leeds, from pre-conception onwards. A baby's brain develops fastest during pregnancy and in the first 2 years of life. A baby's experiences during this time impact	<ul style="list-style-type: none"> <li>Improved early access to maternity services for those living in deprived areas and of certain BAME backgrounds.</li> <li>Improved continuity of carer, particularly for those living in deprived areas and of certain BAME backgrounds.</li> </ul>

Programme	Programme Overview	Challenges the programme is looking to address
	upon their long-term mental, physical and social outcomes. Improving maternity services therefore contributes to reducing long-term demand on secondary healthcare services.	<ul style="list-style-type: none"> <li>• Reducing incidence of smoking in pregnancy.</li> <li>• Working with public health colleagues to increase rates of breastfeeding.</li> </ul>
Children and Young People - MH and Wellbeing	The Children and Young People Mental Health and Wellbeing programme aims to support children and young people as early as possible (in their life and in the presentation of a mental health need). Care needs to be provided by the right person as close to the child or young person's home or school as possible. We want to increase the number of children and young people receiving accessible, appropriate and timely support, in response to their mental health and wellbeing needs. This will prevent escalation of need and ultimately reduce demand on crisis and specialist inpatient services.	<ul style="list-style-type: none"> <li>• Children and Young People and their families, communities and schools feel supported to promote and strengthen Mental Health and Wellbeing</li> <li>• To reach more children and young people earlier in the pathway of their need – by increasing the offer of early help /intervention services in local settings and via digital means.</li> <li>• Configuring services in a way which will support young people as they transition to adult services.</li> <li>• Ensuring at all services are inclusive trauma informed, address health inequalities and provide high quality support to the most vulnerable.</li> </ul>
Children and Young People with Special Educational Need or Disability (SEND)	The Children and Young People SEND programme looks at the health needs of Children and young people (up to 25) with a special educational need or disability and/or other complex need; this includes those who are part of the Transforming Care Programme cohort. The aim is for needs to be identified and responded to earlier, helping to address inequalities and where appropriate reduce the acuity of provision.	<ul style="list-style-type: none"> <li>• Attending and attaining in inclusive schools and other settings.</li> <li>• Achieving in wider life.</li> <li>• Enjoying healthy lifestyles.</li> <li>• Having voice and influence.</li> <li>• Having joined up support for their family.</li> </ul>
Children and Young People – Long Term Conditions (LTC)	The Children and Young People LTC programme will support the preparation for the new Children's Hospital. A key outcome is for children and families to be able to access the right advice and support at the right time and in the right place. Integral to this work an ambition to support children and families as early as possible in the presentation of a need, as locally as possible. This includes a focus on prevention and supporting effective self-care, early intervention and management	<ul style="list-style-type: none"> <li>• The importance of ensuring families and schools are enabled to support children with long term conditions</li> <li>• Recognising the critical support role of families and school and the inequalities in outcomes which can be seen at the moment, particularly between areas of deprived and non-deprived Leeds.</li> </ul>

Programme	Programme Overview	Challenges the programme is looking to address
Mental Health	<p>The Mental Health programme focuses on increasing early intervention and prevention to ensure that more people with mental health problems, receive effective, person-centred, community-based help and treatment earlier. This will be targeted to at risk groups, and the ambition is that this will result in less people requiring more intensive support and reduced health inequalities.</p>	<ul style="list-style-type: none"> <li>• Improving access to early intervention and prevention support in the community</li> <li>• Reducing Health inequalities for people with Serious Mental Illness (SMI)</li> <li>• Reducing Health inequalities for other groups, including but not restricted to people from BAME groups and Older People</li> <li>• Ensuring that where possible people receive care closer to home Improved quality and responsiveness of mental health crisis provision</li> </ul>
Learning Disabilities (LD) and Autism	<p>The LD and Autism Programme aims to improve the health and wellbeing of autistic people and people who have a learning disability, to reduce health inequalities, improve quality of life and increase life expectancy. It includes the implementation of a range of reasonable adjustments to achieve equal access to mainstream services.</p>	<ul style="list-style-type: none"> <li>• Increase the number and range of providers able to meet the needs of highly complex individuals</li> <li>• Provision of appropriate wrap around community services</li> <li>• Development of available, appropriate housing options</li> <li>• Increased positive risk management</li> <li>• Reduce the health inequalities experienced</li> <li>• Increase access to timely, appropriate healthcare provision</li> <li>• Improve autism awareness across the system</li> </ul>
Long Term Conditions (LTC)	<p>The LTC programme is focused on Living, Ageing and Dying well. The main areas of focus are, prevention of long-term conditions through promotion of healthy lifestyle messaging/programmes and the identification of at risk cohorts, a focus on ensuring that complications do not arise as a result of a long-term conditions, building awareness of signs and symptoms and optimising all therapy treatment available and working to ensure that patients with a LTC are empowered to take an active role in managing their condition.</p>	<ul style="list-style-type: none"> <li>• Focusing on our most deprived populations including Adults with Learning Disabilities, people with Serious Mental Illness (SMI) and vulnerable groups across all LTCs; including diabetes, respiratory, cardiovascular disease, liver disease and neurological conditions.</li> <li>• Transitioning from a focus on individual conditions/services to a true population health approach for long-term conditions.</li> </ul>
Cancer	<p>The Cancer programme is an 'all age' programme. The left shift within cancer reflects 2 main areas of impact: prevention of cancers through promotion of healthy lifestyle messaging; and A shift to earlier staging of cancer diagnoses achieved through several strands of work including building awareness of signs and symptoms of cancer across communities,</p>	<p>Specific challenges are:</p> <ul style="list-style-type: none"> <li>• High incidence rates of Cancer</li> <li>• Achieving increased screening uptake rates especially in our most deprived populations</li> <li>• A focus on earlier staging &amp; addressing high rate of emergency cancer presentations. There is a national target of 75% stage 1 &amp; 2 by 2028</li> </ul>

Programme	Programme Overview	Challenges the programme is looking to address
	driving improvements in screening uptake and the implementation of innovative tests/ triage and assessment processes.	
Frailty	The Frailty programme has an overarching aim to increase the proportion of care for people living with frailty which is delivered in the community. By adopting a proactive approach we will move care 'up-stream' by facilitating a greater focus on activities that prevent and manage ill health, including self-care, support for carers and promotion of age friendly communities. As around 4,000 of the 6,000 people in Leeds diagnosed with dementia are in the 'Frailty Cohort' this programme also encompasses work focusing on dementia.	<ul style="list-style-type: none"> <li>• Living, aging and dying well according to what matters most to our people</li> <li>• Reducing disruption to people's lives as a result of avoidable harm and numerous contact with hospital services</li> <li>• Identifying all people in this population group and assessing their needs and assets</li> <li>• Caring well, defined by 'what really matters' when caring</li> <li>• Professionals working well together across the system around the needs of people</li> </ul>
End of Life	The End of Life programme includes people within the last months, weeks or hours of life, and those seeking to make care plans in advance of this time. The left shift means more patients setting out their wishes and plans for care at the end of life and more of these plans being delivered. In practice this is likely to mean more patients receiving care at the end of life outside of the hospital environment.	<ul style="list-style-type: none"> <li>• Increase uptake of advanced care planning discussions amongst all sections of society, with a particular focus on those groups of people who are currently less likely to have an advanced care plan in place e.g. those from BAME backgrounds and those from more deprived parts of the city.</li> <li>• Increase the proportion of people who are able to die in a place of their choosing.</li> </ul>

### The importance of our enablers

For the Left Shift Blueprint to really make a difference we need to harness the power of our city wide enablers and understand how they can support the system in achieving our ambitions. Enablers include digital, engagement – ensuring people's voices are being fed into the work and acted upon in a systematic way, estates, finance, developing a consistent approach to quality improvement and workforce. The following principles have been suggested through the blueprint for workforce, digital and estates:

Workforce	Digital	Estates
<ul style="list-style-type: none"> <li>• To build a healthy Leeds placed organisational culture</li> <li>• To grow a sustainable and capable workforce across and within Leeds</li> <li>• To enable integrated working with all partners</li> <li>• To ensure the leadership and management of our people is effective and conducted in a manner that improves staff</li> </ul>	<ul style="list-style-type: none"> <li>• Creating an efficient and agile workforce</li> <li>• Crossing boundaries through interoperability and shared records</li> <li>• Being paper-free at the point of care</li> <li>• Developing digital channels to improve engagement, choice and access</li> <li>• Being driven by intelligence</li> </ul>	<ul style="list-style-type: none"> <li>• One public estate</li> <li>• Optimal utilisation</li> <li>• Shared occupancy</li> <li>• Appropriate rationalisation</li> <li>• High standard for delivery of services</li> </ul>

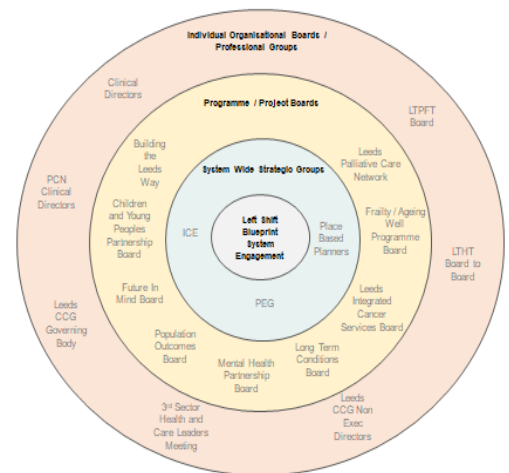
Workforce	Digital	Estates
experience and promotes innovative high-quality care and flexible working where required.		

### Involvement in developing the Left Shift Blueprint

It is essential that in everything we do we start with people. We work with people rather than doing things to them, maximising the assets, strengths and skills of Leeds citizens, carers and workforce. The work outlined in each of our programmes has been developed through engaging with people and we are committed to continually checking there is a strong correlation between the Left Shift Blueprint and the things that as a system people are telling us.

There is commitment to continue to work closely with people to shape the Left Shift Blueprint and deliberative events are being planned for 2021 to do this.

It is also essential that plans are developed alongside all of our health and care partners. As can be seen from the diagram opposite the Left Shift Blueprint has been developed with partners across the city. Our strategic indicators have been shaped through working with the Place Based Planners group. This is a group of professionals from across the key health and care organisations within the city with a remit around planning.



Partners from across the system, including colleagues from our vibrant 3<sup>rd</sup> sector have been involved in setting programme measures and priorities through existing boards and governance arrangements across this city and have used patient feedback to develop these. Some programme board have not been regularly due to the pandemic, for example the Prevention board, the Learning Disability partnership board and the Adult Autism partnership boards have not met during this time. Where this has been the case the relevant subject matter experts have been involved.

### Our commitment to delivering the blueprint

As a health and care system we are committed to working collectively towards achieving the ambitions of the Left Shift Blueprint. Through the Health and Wellbeing Strategy partners have signed up to:

- Making decisions based on the outcomes that matter most to people
- Jointly invest and commission proportionately more of our resources in first class primary, community and preventative services whilst ensuring that hospital services are funded to also deliver first class care
- Direct our collective resource towards people, communities and groups who need it the most and those focused on keeping people well

The Left Shift Blueprint allows us to identify what those key outcomes are. Ways are being explored through the emerging Integrated Care Partnership to 'sign the system up' more formally towards achieving the ambitions as set out within the Left Shift Blueprint to support partners to holding each other to account for doing this.

### **Our next steps**

Now that through the left shift blueprint we have clarity on how we would like the health of the city to change over the next five to ten years, we now need to focus on making this ambition a reality. To support us in enabling real change on the ground over the coming months there will be a focus on:

1	Working with each of the boards that lead on our programmes of work, as set out above, to understand the support required for them to implement the change as set out in their programmes and for them to make a real difference for the population that they serve.
2	Engaging with our localities through our Local Care Partnerships and Primary Care Networks to support them in leading the blueprint at a local and driving the change in our communities.
3	Work with city wide enablers teams including: workforce, estates, digital, organisational development, finance, communications and quality improvement.
4	Work to ensure that the necessary data and business intelligence will be available to support in making data led decisions, focusing on those interventions that will make the biggest difference in our communities.
5	Support everyone in Team Leeds to understand what their role is in implementing the left shift blueprint through working with OD leads to develop an OD plan for the City.