



**Report of:** Paul Bollom (Executive Lead, Leeds Health and Care Plan)

**Report to:** Leeds Health and Wellbeing Board

**Date:** 20 June 2017

**Subject:** Leeds Health and Care Plan: Progressing a conversation with citizens

Are specific geographical areas affected? If relevant, name(s) of area(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" 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? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

### Summary of main issues

The Leeds Health and Care Plan (Leeds Plan) is the Leeds description of what it envisages health and care will look like in the future and how it will contribute to the delivery of the vision and objectives of the Leeds Health and Wellbeing Strategy 2016-21.

The Leeds Plan is the city's collective plan for addressing the three gaps that have been identified by health, care and civic leaders. These are gaps in: health inequalities; quality of services; and, financial sustainability.

The Leeds Plan provides the content for a discussion with citizens to help progress the planning that will be required to develop a citizen-centred approach to delivering the desired health improvements for Leeds to be the best city for health in 2030.

### Recommendations

The Health and Wellbeing Board is asked to:

- Consider the contents of the draft narrative for the 'Leeds Plan' and provide feedback as to whether it provides appropriate information to progress our conversation with citizens about the future of health and care in Leeds.
- Approve plans to progress a conversation with the public, based around the content of the summary report, and delivered in conjunction with the 'Changing Leeds' discussion.

## **1 Purpose of this report**

1.1 The purpose of this report is to provide the Health and Wellbeing Board with an overview of:

- The draft 'Leeds Health and Care Plan' narrative document (Appendix A) and the approach taken to engage citizens in the future development and delivery of our plans
- Proposals to begin the next phase of our conversation with citizens, in partnership with the 'Changing Leeds' (Appendix B)

1.2 Seek assurance from the Board that it supports:

- The draft narrative to published and engaged on
- Proposals for officers within the Health Partnerships team to undertake a conversation with citizens, delivered through the 'Changing Leeds' platform.

## **2 Background information**

### *Local picture*

2.1 Leeds has an ambition to be the Best City in the UK by 2030. A key part of this is being the Best City for Health and Wellbeing and Leeds has the people, partnerships and placed-based values to succeed. The vision of the Leeds Health and Wellbeing Strategy is: 'Leeds will be a healthy and caring city for all ages, where people who are the poorest will improve their health the fastest'. A strong economy is also key: Leeds will be the place of choice in the UK to live, for people to study, for businesses to invest in, for people to come and work in and the regional hub for specialist health care. Services will provide a minimum universal offer but will tailor specific offers to the areas that need it the most. These are bold statements, in one of the most challenging environments for health and care in living memory.

2.2 Since the first Leeds Health and Wellbeing Strategy in 2013, there have been many positive changes in Leeds and the health and wellbeing of local people continues to improve. Health and care partners have been working collectively towards an integrated system that seeks to wrap care and support around the needs of the individual, their family and carers, and helps to deliver the Leeds vision for health and wellbeing. Leeds has seen a reduction in infant mortality as a result of a more preventative approach; it has been recognised for improvements in services for children; it became the first major city to successfully roll out an integrated, electronic patient care record, and early deaths from avoidable causes have decreased at the fastest rate in the most deprived wards.

2.3 These are achievements of which to be proud, but they are only the start. The health and care system in Leeds continues to face significant challenges: the ongoing impact of the global recession and national austerity measures, together with significant increases in demand for services brought about by both an ageing population and the increased longevity of people living with one or more long term

conditions. Leeds also has a key strategic role to play at West Yorkshire level, with the sustainability of the local system intrinsically linked to the sustainability of other areas in the region.

- 2.4 Leeds needs to do more to change conversations across the city and to develop the necessary infrastructure and workforce to respond to the challenges ahead. As a city, we will only meet the needs of individuals and communities if health and care workers and their organisations work together in partnership. The needs of patients and citizens are changing; the way in which people want to receive care is changing, and people expect more flexible approaches which fit in with their lives and families.
- 2.5 Further, Leeds will continue to change the way it works, becoming more enterprising, bringing in new service delivery models and working more closely with partners, public and the workforce locally and across the region to deliver shared priorities. However, this will not be enough to address the sustainability challenge. Future years are likely to see a reduction in provision with regard to services which provide fewer outcomes for local people and offer less value for the 'Leeds £'.
- 2.6 Much will depend on changing the relationship between the public, workforce and services. There is a need to encourage greater resilience in communities so that more people are able to do more themselves. This will reduce the demands on public services and help to prioritise resources to support those most at need. The views of people in Leeds are continuously sought through public consultation and engagement, and prioritisation of essential services will continue, especially those that support vulnerable adults, children and young people.

#### *National picture*

- 2.7 In October 2014, the NHS published the Five Year Forward View, a wide-ranging strategy providing direction to health and partner care services to improve outcomes and become financially sustainable. On 22/12/15, NHS England (NHSE) published the 'Delivering the Forward View: NHS planning guidance 2016/17 – 2020/21', which is accessible at the following link:
- 2.8 <https://www.england.nhs.uk/wp-content/uploads/2015/12/planning-guid-16-17-20-21.pdf>
- 2.9 The planning guidance asked every health and care system to come together to create their own ambitious local blueprint – Sustainability and Transformation Plan (STP) - for accelerating implementation of the Five Year Forward View and for addressing the challenges within their areas. STPs are place-based, multi-year plans built around the needs of local populations ('footprints') and should set out a genuine and sustainable transformation in service user experience and health outcomes over the longer term.

### **3 Main issues**

- 3.1 The Leeds Plan narrative sets out ideas about how we will improve health outcomes, care quality and financial sustainability of the health and care system in the city.
- 3.2 The plan recognises the Leeds Health and Wellbeing Strategy 2016-2021, its vision and its objectives, and begins to set out a plan to achieve its aims.
- 3.3 The plan recognises and references the collaborative work done by partners across the region to develop the West Yorkshire and Harrogate Sustainability and Transformation Plan (WYH STP).
- 3.4 The development of the Leeds Plan has been supported by partners and stakeholders from across various health and care providers and commissioners, as well as Healthwatch Leeds, 3<sup>rd</sup> sector and Local Area Committees
- 3.5 The Leeds Plan narrative presents information for a public and wider staff audience about the plan in a way that that citizens and staff can relate to and which is accessible and understandable.
- 3.6 The Leeds Plan narrative (when published) will be designed so that the visual style and branding is consistent with that of the Leeds Health and Wellbeing Strategy 2016-21 and will be part of a suite of material used to engage citizens and staff with
- 3.7 The Leeds Plan narrative is clear that Leeds starts from a very strong position, with many unique characteristics.
- 3.8 The narrative contains information about:
- The strengths of our city, including health and care
  - The reasons we must change
  - How the health and care system in Leeds works now
  - How we are working with partners across West Yorkshire
  - The role of citizens in Leeds
  - What changes we are likely to see
  - Next steps and how you can stay informed and involved.
- 3.9 The plan seeks to present an honest representation of the reasons we must change, including the need to improve health outcomes, reduce health inequalities and ensure that services are financially sustainable in future.

### **4 Health and Wellbeing Board governance**

#### **4.1 Consultation, engagement and hearing citizen voice**

- 4.1.1 A significant amount of engagement activity has taken place when the Leeds Health and Wellbeing Strategy was being refreshed. This is alongside ongoing

engagement activity on strategic decision making which occurs across the activity of the Health and Wellbeing Board and its constituent members. All of this has helped shape the Leeds plan since 2016.

- 4.1.2 Conversations have also taken place over the last year about how best to align the citizen conversation about health and care in Leeds with 'Changing Leeds'. See Appendix B for a briefing about 'Changing Leeds'.
- 4.1.3 Changing Leeds is an engagement with the whole city on issues arising from the changing 'social contract', civic enterprise approach, and the future role of the council.
- 4.1.4 The overall purpose of 'Changing Leeds' is to help people who live, work and study in the city think differently about their relationship with local public services, and ultimately do things differently as well.
- 4.1.5 By working with colleagues from LCC, it is hoped that we will be able to deliver a better quality of conversation with the public through the 'Changing Leeds' platform.
- 4.1.6 It will enable us to engage people in a way that will encourage them to think more holistically about themselves, others and places rather than thinking about NHS or Council services. Citizen and stakeholder engagement on the Leeds Plan has already begun in the form of Community Committee discussions across Leeds in February and March.
- 4.1.7 In order to progress the thinking and partnership working that has been done to help inform the Leeds Plan to date, the next stage for the Leeds Plan is to begin a broader conversation with citizens.
- 4.1.8 The conversation we would like to have with citizens will be focussed on the ideas and general direction of travel outlined in the Leeds Plan. It will ask citizens what they think about the Plan and will invite them to comment and provide their thoughts.
- 4.1.9 When the work of the Leeds Plan begins to develop proposals for service changes, then, plans would be developed for formal engagement and/or consultation in line with existing guidance and best practice.
- 4.1.10 A detailed communication and engagement plan is currently being developed and will be shared with the Health and Wellbeing Board for comment.

## **4.2 Equality and diversity /cohesion and integration**

- 4.2.1 Our preparation for delivering a conversation with citizens about plans for the future of health and care in Leeds will be reflective of the rich diversity of the city, and mindful of the need to engage with all communities.
- 4.2.2 Any future changes in service provision arising from this work will be subject to equality impact assessment.

### **4.3 Resources and value for money**

- 4.3.1 The final Leeds Plan will have to describe the financial and sustainability gap in Leeds, the plan Leeds will be undertaking to address this and demonstrate that the proposed changes will ensure that we are operating within our likely resources. In order to make these changes, we will require national support in terms of local flexibility around the setting of targets, financial flows and non-recurrent investment.
- 4.3.2 As part of the development of the West Yorkshire and Harrogate STP, the financial and sustainability impact of any changes at a West Yorkshire level and the impact on Leeds will need to be carefully considered and analysis is currently underway to delineate this.
- 4.3.3 It is envisaged that Leeds may be able to capitalise on the regional role of our hospitals using capacity released by delivering our solutions to support the sustainability of services of other hospitals in West Yorkshire and to grow our offer for specialist care for the region.

### **4.4 Legal Implications, access to information and call In**

- 4.4.1 There are no access to information and call-in implications arising from this report.

### **4.5 Risk management**

- 4.5.1 Failure to have robust plans in place to address the gaps identified as part of the Leeds Plan development will impact the sustainability of the health and care in the city.
- 4.5.2 Two key overarching risks present themselves, given the scale and proximity of the challenge and the size and complexity of both the West Yorkshire and Harrogate footprint and Leeds itself:
- 4.5.3 Potential unintended and negative consequences of any proposals as a result of the complex nature of the local and regional health and social care systems and their interdependencies. Each of the partners has their own internal pressures and governance processes they need to follow.
- 4.5.4 Ability to release expenditure from existing commitments without de-stabilising the system in the short-term will be extremely challenging as well as the risk that any proposals to address the gaps do not deliver the sustainability required over the longer-term.
- 4.5.5 Whilst the in Leeds the health and care partnership has undertaken a review of non-statutory governance to ensure it is efficient and effective, the bigger West Yorkshire footprint upon which we have been asked to develop an STP will present much more of a challenge.
- 4.5.6 The effective management of these risks can only be achieved through the full commitment of all system leaders within the city to focus their full energies on the

developing a robust Leeds Plan and then delivering the STP within an effective governance framework.

## **5 Conclusions**

5.1 As statutory organisations across the city working with our thriving volunteer and third sectors and academic partners, we have come together to develop, for the first time, a system-wide plan for a sustainable, high-quality health and social care system. We want to ensure that services in Leeds can continue to provide high-quality support that meets, or exceeds, the expectations of adults, children and young people across the city: the patients and carers of today and tomorrow.

5.2 Our Leeds STP will be built on taking our asset-based approach to the next level to help deliver the health and care aspects of the Leeds Health and Wellbeing Strategy. This is enshrined in a set of values and principles and a way of thinking about our city, which:

- Identifies and makes visible the health and care-enhancing assets in a community;
- Sees citizens and communities as the co-producers of health and well-being rather than the passive recipients of services;
- Promotes community networks, relationships and friendships that can provide caring, mutual help and empowerment;
- Values what works well in an area;
- Identifies what has the potential to improve health and well-being the fastest;
- Supports individuals' health and well-being through self-esteem, coping strategies, resilience skills, relationships, friendships, knowledge and personal resources;
- Empowers communities to control their futures and create tangible resources such as services, funds and buildings;
- Values and empowers the workforce and involves them in the coproduction of any changes.

## **6 Recommendations**

The Health and Wellbeing Board is asked to:

- Consider the contents of the draft narrative for the 'Leeds Plan' and provide feedback as to whether it provides appropriate information to progress our conversation with citizens about the future of health and care in Leeds.
- Approve plans to progress a conversation with the public, based around the content of the summary report, and delivered in conjunction with the 'Changing Leeds' discussion.

## **7 Background documents**

7.1 None



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**How does this help reduce health inequalities in Leeds?**

The Leeds Health and Care Plan (Leeds Plan) is the city’s collective plan for addressing the three gaps that have been identified by health, care and civic leaders. These are gaps in: health inequalities; quality; and, financial sustainability.

The Leeds Plan builds on the vision and objectives of the Leeds Health and Wellbeing Strategy 2016-21, and begins to develop the thinking about how these will be achieved. The Leeds Plan will provide the content for a discussion with citizens to help progress the planning that will be required to develop a citizen-centred approach to delivering the changes required for Leeds to be the best city for health in 2030.

**How does this help create a high quality health and care system?**

See above

**How does this help to have a financially sustainable health and care system?**

See above

**Future challenges or opportunities**

By working with colleagues from Leeds City Council’s communications team, it is hoped that we will be able to undertake a wide ranging and open conversation with the public as part of the ‘Changing Leeds’ programme. This will enable us to engage people in a way that encourages them to think more holistically about themselves, others and places rather than thinking just about NHS or Council services in isolation.

The conversation will help to inform the next phase of changing, improving and implementing the Leeds Plan.

**Priorities of the Leeds Health and Wellbeing Strategy 2016-21**

A Child Friendly City and the best start in life	X
An Age Friendly City where people age well	X
Strong, engaged and well-connected communities	X
Housing and the environment enable all people of Leeds to be healthy	
A strong economy with quality, local jobs	
Get more people, more physically active, more often	X
Maximise the benefits of information and technology	X
A stronger focus on prevention	X
Support self-care, with more people managing their own conditions	X
Promote mental and physical health equally	X
A valued, well trained and supported workforce	X
The best care, in the right place, at the right time	X