

Report of the Director of Adults and Health and Director of City Development

Report to Executive Board

Date: 21st March 2018

Subject: Leeds Academic Health Partnership

Are specific electoral wards affected? If yes, name(s) of ward(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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 checked="" type="checkbox"/> Yes <input 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

1. In July 2017 Leeds City Council Executive Board supported, the emerging programme of active projects led by the Leeds Academic Health Partnership (LAHP) to deliver better health outcomes, reduced health inequality and more jobs together with the stimulation of investment in health and social care. The Board requested that further reports detailing the LAHP's progress be submitted to future meetings.
2. The LAHP has since July 2017 made good progress to develop a strategic framework of priorities to select and accelerate key projects to deliver real and lasting benefits to the city's health economy. These closely align with the Best Council Plan for Leeds to be the best city in the UK, and one that is compassionate with a strong economy, which tackles poverty and reduces the inequalities that still exist. The Strategic Framework aligns to priorities identified in the Leeds Health and Wellbeing Strategy, the Leeds Health and Care Plan and (emerging) Leeds Inclusive Growth Strategy.
3. The launch of the Strategic Framework is helping to mobilise partner resources delivered collaboratively. A summary of progress is provided on the first phase of projects. These include the Health and Care Academy which supports broader work by the Council to promote social mobility by expanding apprenticeships and opportunities for progression. The identification of clear priorities will also strengthen our ability to successfully bid for grants and funds from government such as the recent invitation to participate in developing a Local Health and Care Digital Record Exemplar. It will help build the case for investment by government in the Innovation District. Better funding will also further support delivery of pilots such as the recently announced 'somalogic' project helping to prevent Type II Diabetes in Leeds.

Recommendations

Executive Board is requested to:

1. Endorse the Strategic Framework priorities and progress made by the Leeds Academic Health Partnership and its programme to deliver better health outcomes, reduced health inequality and more jobs and stimulate investment in health and social care within the City's Health and Wellbeing Strategy.
2. Note that the Chief Officer, Health Partnerships Team will be responsible on behalf of the Council for overseeing implementation by the LAHP of its programme.

1. Purpose of this report

- 1.1 This report provides an update on the progress made by the Leeds Academic Health Partnership to establish a Strategic Framework of priorities and summary of its programme of active projects to deliver these. It acknowledges the role of the Leeds Academic Health Partnership in a wider strategic context of the Best Council Plan to create a strong economy and compassionate city.

2. Background information

- 2.1 In March 2015 Leeds City Council Executive Board supported, in principle, Leeds City Council's work with the city's universities and local NHS partners to establish a Leeds Academic Health Partnership (LAHP) to help improve the health of the local population by developing skills and technology and stimulating investment in health and social care. The LAHP Board consists of: Leeds City Council; the Leeds Teaching Hospital NHS Trust; Leeds and York Partnership NHS Foundation Trust; Leeds Community Healthcare; the city's three Clinical Commissioning Groups; and three universities (University of Leeds, Leeds Trinity and Leeds Beckett). It made provision for associate membership for The Yorkshire and Humber Academic Health Science Network and subsequently for Leeds City College and St Gemmas as affiliate members. It is currently chaired by Sir Alan Langlands, Vice-Chancellor of the University of Leeds and supported by a small team including time from Council Officers.
- 2.2 In April 2016 Leeds City Council Executive Board supported, the Business Case LAHP and its programme to deliver better health outcomes; reduced health inequality; more jobs together with the development of skills and technology; and the stimulation of investment in health and social care. The Board also requested that further reports detailing the progress being made by the LAHP be submitted to future meetings for consideration.
- 2.3 In July 2017 Leeds City Council Executive Board supported, the emerging programme of active projects led by the LAHP to deliver better health outcomes reduced health inequality and more jobs together with the stimulation of investment in health and social care. The Board requested that further reports detailing the LAHP's progress be submitted to future meetings

3. Main issues

- 3.1 **Strategic Priorities for the LAHP:** The second year of the LAHP's programme has focussed on developing a clear strategic framework of priorities to guide the

selection of projects to be selected in its programme of work. The framework has been developed in the context of partnership working and its aims reflect a partnership ethos including

- Supporting the delivery of the partners' own (and shared) strategies and plans – helping to simplify, not add to, complexity of working across boundaries.
- Reflecting the breadth of the partnership, for example: physical and mental health; care provided in and out of hospital; health and social care; discovery science to applied health research
- Build the reputation of and add value to all partner organisations and the city across the totality of the work programmes.
- Build on and bring together existing strengths across the city and also develop areas of new capability

3.2 The Strategic Framework has therefore been produced in a power point format (attached) rather than in a traditional report format. This will make it easier for partners for reference purposes and help them assimilate commitments into their longer term planning and support for strengthen education, innovation and research in Health and Care. It's launched in the context of ongoing progress to deliver projects with the potential to bring significant benefits to our local health and care system.

3.3 The key priorities identified in the Strategic Document have been developed through consultation with each of the LAHP Board Members who in turn have sought to reflect their engagement in a wider network of boards including the Leeds Health and Well Being Board and the Leeds Health and Care Plan Development Group. The priorities and enablers are therefore clearly aligned with the Leeds Health and Well Being Strategy, The Leeds Health and Care Plan, The Children and Young People's Plan and Best Start Plan in addition to the emerging Inclusive Growth Strategy and Leeds Talent and Skills Plan and thus contribute to the overarching Best Council Plan. The priorities are summarised in the table below.

A Good Start in Life	
(1)	Obesity
(2)	Mental health
Living Well	
(3)	The cardio-metabolic human
(4)	Co-morbid physical and mental health
Health Ageing	
(5)	Frailty
(6)	End of life

3.4 In selecting the six core programmes the LAHP Board took into account both opportunities and stated needs of the wider Health and Care System. In this respect;

- All six can be seen through a lens of prevention and/or self-care
- There is already a successful research base in most of the six areas, but room to develop and grow through collaboration and interdisciplinary approaches across and within the universities
- All six have the potential to impact positively on citizens and the sustainability of the health and care system
- All six are nationally and internationally relevant as well as being important for Leeds, offering significant education and research opportunities

- All six have the potential to support reductions in inequality (e.g. deprivation/socio-economic impact; ethnicity)
- Clinical senate discussions about winter pressures/managing demand have focussed heavily on behaviour change and frailty/end of life care. The LAHP will have a key role in continuing to develop and deepen these relationships and to attract other innovators and investors into the City.

3.5 **Supporting Infrastructure; The Enablers** The LAHP will focus effort on supporting the success of these programmes and will do so by ensuring that a supporting infrastructure is in place to ensure their delivery. The aim is to be bid-ready and to proactively influence funding decisions in these areas. This infrastructure comprises 4 enablers as indicated in the table below;

One Workforce	Leeds Health and Social Care Academy
Information and Technology	A Learning Healthcare System
Personalisation	Leeds Centre for Personalised Medicine
A Culture of Health and Care Innovation	Health Innovate Leeds

3.6 **Summary of progress on the Enablers:** Good Progress has been made to establish and deliver each of these enabling projects as indicated below.

3.7 **One Workforce; The Leeds Health and Care Academy.**(The ‘Academy’) The LAHP has initiated this project . The description ‘one workforce’ refers to a commitment by partners in the Health and Care System to work flexibly across community, acute, mental health and social care. It refers to collaborative working to achieve the same or similar effectiveness to the seamlessness of working for a single employer. It also means working innovatively and efficiently through changes in role and skill mix and developing better use of digital opportunities and new technologies. The proposed Academy will support this by creating integrated learning and development for an estimated 57,000 strong workforce across the health and care sector in the city, with people in training and development working together across organisational and professional boundaries. This will promote systems thinking and leadership, and embed research and innovation.

3.8 The Academy can also be expected to address the need for opportunities for better social mobility through for example expansion through time in the number of apprenticeships and pathways for career development for those who may have left school with no or few qualifications.

The Leeds Health and Care Academy project transition team was established on the 1 October 2017, and is hosted by Leeds Teaching Hospitals NHS Trust.

A project board has been established. A wider project stakeholder group is also being formed to ensure engagement and alignment with the wider health and care system and to support the board. LCC are represented on both the Board and wider stakeholder group. During this ‘Planning and Implementation Stage’ activities to be transferred into the academy have been identified. The initial go live date is scheduled for April 2018 with the following activities to be incorporated into the Academy :

- Apprenticeships
- Future Workforce/Closer to Work
- System OD Leadership.

The following work streams will be progressed with the aim of incorporating them into the Academy from September 2018 onwards as they are extremely broad and diverse in nature and will require longer planning time:

- Statutory, mandatory and priority training
- In service L&D to be renamed Current and new L&D curriculum.

Remaining work streams will be phased in at a future point in the project as

- Research and Innovation
- Learning and Development Community Development

Information and Technology; A Learning Health care System; The LAHP has been key to co-ordinating recent lobbying by partners in the city and region to attract support from government to further develop our digital and medical technology capabilities (including the Leeds Care Record). This work has resulted in Leeds and its partners in the region being invited to participate by NHS England and Office of Life Sciences in a call for funding to create one of only five Local Health and Care Exemplars (LHCRE). The call (with an expected value of up to 5-£7m for each LHCRE) seeks to significantly improve the digital infrastructure required to connect local health and care systems to drive service improvement. Exemplars will be required to demonstrate how information can be shared between professionals and citizens at the point of care and to enable patients to be active participants in their own records.

3.9 **Personalisation;** The Leeds Centre for Personalised Medicine and Health (LCMPH): Personalised Medicine and Health is the process by which the decisions made about health and care by patients and the public, supported by clinicians, are enriched and improved by the availability of the best possible information, technology and evidence. The centre builds on the University of Leeds strengths in Precision Medicine and includes expertise in relation to cancer, muscular skeletal conditions, and medical devices and digital health.

3.10 Funding for the first phase (covering early health economic modelling) of the Prolaris project has been secured. The work will assess the cost-effectiveness of the Prolaris prostate cancer stratification test within the healthcare system, and will be led by Leeds Teaching Hospitals NHS Trust.

The LCPMH and SomaLogic have agreed to establish a pilot project within Leeds to develop and evaluate their SomaScan Health Insight technology. The proposed first project of the test-bed will focus around the prevention of Type II diabetes in at risk populations. An initial pilot will recruit around 100 patients in the second half of 2018, as preparation for a larger pilot to determine the population health impact in the greater Leeds patient population

3.11 **A Culture of Health and Care Innovation. Health Innovate Leeds;** The Report to Executive Board in July referred to plans to draw inward investment into Leeds and generate wealth for the city. The LAHP is developing an innovation service to promote Leeds as a centre for innovation, attract and then navigate innovators to a number of areas where we know the city has excellent strengths and capabilities and to work with the local health and care system to create a receptive culture and processes supporting innovation.

The Health Innovation Quarter service will build on wider investment in the proposed Innovation Quarter and help develop the capabilities outlined in the Science and Innovation Audit for Medical Technologies completed for the

Department of Business, Energy and Industrial Strategy (BEIS), to highlight investment opportunities for the sector.

The Audit led by the University of Leeds was published at the end of September, to much acclaim, and maps the key assets hosted in Leeds City Region. It also notes that £350 m has been invested in developing the sector and in securing the position of Leeds as its leading centre in the UK and recommends that a further £250 m should be invested to enable it to exploit opportunities in the global health market. The Audit has been influential in helping to shaping the subsequent announcement of a life Sciences Sector Deal.

This is intended to give the life sciences sector and government an agreed set of strategic goals that will ensure the UK builds on its exceptional reputation for science and research, genomics and clinical trials. Leeds features in several places in the published document which includes references to the Innovation Quarter, Nexus, a £40m Innovation Centre driven by the University of Leeds, which will actively incubate and grow start-ups, and the Leeds Health and Social Care Academy providing joined-up training and development for the 57,000 people who work in the health and care sector across the City of Leeds. The benefits for Leeds, like the other centres identified in the UK, will be breakthrough treatments, innovative research and technologies, and creation of skilled jobs and investment.

4. Corporate considerations

4.1 Consultation and engagement

4.1.1 This report includes findings based on meetings and decisions approved with all member partners represented on the LAHP Board including the City Council, local NHS organisations and all three Universities. It is also based on a report presented to the Leeds Health and Wellbeing Board in February 2018 and summary of slides presented to Adults and Health Scrutiny Board in January 2018

4.2 Equality and diversity / cohesion and integration

4.2.1 The Strategic Framework seeks to prioritise projects to deliver the stated key outcomes of quality and efficiency, economic growth and inequalities as previously approved by the Council's Executive Board. The slides include a statement that the six core collaborative work programmes were selected on the basis that 'All six have the potential to support reductions in inequality (e.g. deprivation/socio-economic impact; ethnicity'. The framework is closely aligned the Leeds Health and Wellbeing Strategy with its commitment, 'where people who are the poorest improve their health the fastest'

4.3 Council policies and best council plan

4.3.1 This Strategic Framework is aligned directly with the Best Council Plan's commitment to create a 'Strong Economy and Compassionate City' and also the commitments within the supporting Leeds Health and Wellbeing Strategy 2016-21 and Leeds Health and Care plan and emerging Inclusive Growth Strategy. The LAHP is particularly well adapted to support the Council's emerging plans for inclusive growth. The LAHP is developing a pipeline of engagements with both

global investors such as J&J and Samsung to build on existing investment in the city and SME's to accelerate jobs and growth.

4.4 Resources and value for money

4.4.1 As indicated in previous reports to Executive Board, the LAHP requires an annual gross contribution of £102,450 from Leeds City Council towards total annual running costs of £683,000. This resource will be used to lever other flows of inward investment into the city health and care system.

4.5 Legal implications, access to information, and call-in

4.5.1 This proposal is based on establishing a partnership which will be based on an informal partnership structure and without legal implications at this stage.

4.6 Risk management

4.6.1 This report provides an update as requested previously by the Executive Board and does require a decision. There are therefore no specific risks arising from this report. An active partnership seeking to promote investment in leading edge innovation in individual projects will require its own system of risk management. These are incorporated in the management arrangements deployed by the LAHP

5. Conclusions

5.1 The Leeds Academic Health Partnership continues to make good progress to develop its strategic framework and supporting programme to deliver better health outcomes; reduced health inequality and inclusive growth. Moreover this progress is feeding through to create national profile for the city and influence key policy and investment planning by the government as exemplified by the recently published Industrial Strategy Life Sciences Sector Deal.

6. Recommendations

Executive Board is requested to:

6.1 Endorse the Strategic Framework priorities and progress made by the Leeds Academic Health Partnership and its programme to deliver better health outcomes, reduced health inequality and more jobs and stimulate investment in health and social care within the City's Health and Wellbeing Strategy.

6.2 Note that the Chief Officer, Health Partnerships Team will be responsible on behalf of the Council for overseeing implementation by the LAHP of its programme

7. Background documents¹

7.1 Nil

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.