

South Tees Health and Well-being Executive Assurance Report

To:	Live Well South Tees Health and Wellbeing Board	Date:	8 th July 2021
From:	Dr Ali Tahmassebi – Chair South Tees Health and Wellbeing Executive	Agenda:	Item 6
Purpose of the Item	To provide South Tees Health and Wellbeing Board with assurance that the Board is fulfilling its statutory obligations, and a summary of progress in implementing the Board’s Vision and Priorities.		
Summary of Recommendations	That Live Well South Tees Health and Wellbeing Board: <ul style="list-style-type: none"> • Are assured that the Board is fulfilling its statutory obligations • Note the progress made in implementing the Board’s Vision and Priorities 		

1 PURPOSE OF THE REPORT

1.1. To provide South Tees Health and Wellbeing Board (HWB) with updates on progress with the delivery of the Board’s Vision and Priorities and assurance that the Board is fulfilling its statutory obligations.

2 BACKGROUND

2.1 To support the Board in the delivery of its priorities a South Tees Health and Wellbeing Executive has been established. The South Tees Health and Wellbeing Executive oversees and ensures the progress and implementation of the Board’s work programme and creates opportunities for the single Health and Wellbeing Board to focus on the priorities.

3 PROGRESSING STATUTORY HEALTH AND WELLBEING BOARD FUNCTIONS

3.1 The next section of this report sets out progress the Health and Wellbeing Executive has made against the Board’s statutory functions.

3.2 <i>Better Care Fund (BCF) 2020/21 and 2021/22</i>
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3.2.1 It was confirmed in December 2020 that areas were not required to submit BCF plans in 2020-21 but must agree the use of the mandatory minimum funding streams locally and place these into a pooling arrangement governed by an agreement under section 75 of the NHS Act 2006.

All Health and Wellbeing Board areas were required to complete an end of year template to the BCF national team. This confirmed that for 2020/21 the national conditions have been met, provided planned and actual spend from the mandatory funding sources, including agreed spend on social care and NHS commissioned out of hospital services from the CCG minimum contribution, and gave end-year feedback on successes and challenges.

The templates for Middlesbrough and Redcar & Cleveland were compiled collectively by the BCF Implementation and Monitoring Group, approved by the Adults Joint Commissioning Board and signed off on behalf of the Health and Wellbeing Board by the Directors of Adult Social Care. They were submitted to the national BCF team by the deadline of 24th May with no feedback received to date. The templates are attached as appendices for reference.

The two key successes we have highlighted are the on-going development of the Single Point of Access and the support to care home schemes which have been invaluable during the pandemic.

3.2.2 **Better Care Fund 2021/22**

The BCF policy framework and planning requirements for 2021/22 have not yet been published. The advice from the national BCF team is for systems to work together to prioritise continuity of provision where existing BCF schemes will be continued in 2021-22 and assume that existing funding streams will continue. iBCF and DFG allocations and grant determinations have been issued by the Government.

We have continued to allocate funding and monitor BCF schemes in accordance with the national conditions and the priority areas of prevention and anticipatory care, reducing unnecessary admissions to hospital and improving discharge processes and patient flow.

4 PROGRESS AGAINST SOUTH TEES HEALTH AND WELLBEING BOARD PRIORITIES

4.1 The Board's agreed vision and priorities are to:

Empower the citizens of South Tees to live longer and healthier lives. With a focus on the following areas key themes:

- a. Inequalities - Addressing the underlying causes of inequalities across the local communities;
- b. Integration and Collaboration - across planning, commissioning and service delivery; and
- c. Information and Data – data sharing, shared evidence, community information, and information given to people.

4.2 Set out below is a summary of the progress the Executive has made towards achieving the Board's priorities since the last Board meeting in March 2021.

4.2.1 **Whole System Change Best Start in Life**

Background:

Health inequalities for many children and young people across South of Tees begin from pre-conception and follow them throughout their life course. In South of Tees there are approximately 3,700 births per year. The health of many of these children is compromised at birth and unless the gap between local and national experience can be reduced, child health locally will continue to lag behind the rest of the country.

The first 1001 days is a period of unique rapid growth where future foundations are set. Investing in this period is one of the most efficient and effective ways to help eliminate extreme poverty, inequalities and boost shared prosperity.

Getting families off to the Best Start is crucial; a child who gets off to a good start will have better health throughout their life, achieve more at school, have a much stronger chance of being in stable employment during their life and have more money to put back into the local economy.

A healthy start to life does not solely benefit the child and their family, the financial benefits are that people are much less likely to need costly acute health and social care services throughout their life too.

This importance of the best start in life is steeped in evidence base and yet often infant health is a blind spot not just locally but also nationally with:

- No national strategy
- Fragmented and highly variable delivery
- Significant cuts in services over the years for the 0-5 agenda
- Many important health and well-being outcomes for infants and children are stagnant or going in the wrong direction (we are failing on basic health indicators)
- When we talk about early help or early intervention it's usually targeting older children.

The covid pandemic has further shone a light on the lack of strategic vision or direction for the first 1001 days with conditions worsening for those families who are already experiencing health inequalities.

The local data tells us we need to support our population at the earliest possible point, the financial case says that we need to gain the best return and the evidence show that if we provide the right intervention before a child reaches two it will have the best impact. This is why it is imperative that need strong leadership to enable a system wide approach to getting Best Start right.

Journey So Far:

- Presentation "spot light on children" was presented at the Health & Well Being Board (March 2020) making a joint case across South Tees for Change
- Sector Led Improvement - The Best Start in Life System Led peer review was developed by a range of health professionals in the North East and was led by Public Health England's Children's and Young People's partnership. The review took place across South Tees between January 2020 and April 2021. The review aimed to help benchmark where we are with our local approach to The Best Start, finding strengths, weaknesses and looking for areas for improvement. The review highlighted that we have passionate staff and good relationships locally but little strategic leadership, no joint vision or clear lines of accountability for the 1001 days agenda. There is a danger if the 1001 days has no strategic lead no one is responsible for the delivery. The findings will support the restructure of the

Maternal, Infant and Child Health Partnership and the development of a whole system change approach to the BSIL.

- Gained learning and support from Better Start Blackpool who developed a similar approach 3 years ago
- We are working with Children North East to submit a bid for ARC funding to support research surrounding community engagement, system change and workforce development for enhancing knowledge of the importance of the first 1001 days
- Held a workshop with the Health & Well-being Board Executive and key partners supported by Better start Blackpool and Frameworks UK to develop the next steps
- Presented the overview and findings to the Health & Well-Being Board in April 21 and a mandate was agreed to:
 - Developing a common language across all workforces and the community using the brain science and use of metaphors
 - Developing a trauma informed approach across all workforces
 - Engaging with the community as partners
 - Exploring the development of a centre for early childhood development with shared resources
 - Developing system governance for 0-5

Progress to date:

- We have established an advisory board for the development of the 1001 days early development hub – board member ship will grow to reflect all key partners
- Developed and submitted a research bid in partnership with Children North East for Arc funding
- Developed a business case for funding to support the development of the 1001 days early development hub
- Redeveloped the Maternal, Infant and Child Health Partnership (To be renamed The Best Start Partnership) as the operational board to support the 1001 days vision and implement the findings from the Sector Led Improvement work

Next steps:

Is to grasp the support from the Health & Wellbeing Board to ensure that across South Tees we listen to and support our communities and provide high quality services with all professionals having a key understanding of the importance of the BSIL. We will achieve this through the development of focused actions and key milestones which will be based around our four cornerstones:

- Governance of the 1001 days agenda
- Workforce development
- The creation of a centre for early development
- Community engagement

The focused actions will:

- Focus on PLACE (not organisations)
- Build common purpose (vision, values, common function) across members
- Shared insight and credible strategies

- Mission-driven
- Strong, collaborative System leadership
- Closer connection to communities

4.2.2 Mental Health and Wellbeing Update

- a) Action across service, community and civic level with regard to the impact of debt and financial difficulties on mental health:

Redcar and Cleveland Borough Council are;

- Recruiting a Welfare Rights officer for 18months to add capacity to welfare rights team to specifically lead on a series of unclaimed benefits campaigns, including council tax support.
- Working with partners from Financial inclusion group to promote uptake of unclaimed benefits
- Connected Footprints in the Community (Foodbank provider) and FROG (Future Regeneration of Grangetown) resulting in Next Step Shop outlet which opened in April within Grangetown United Community Hub providing subsidised food to those experiencing financial hardship. Also supported FROG to appoint Welfare Rights Link worker to work alongside Next Step Shop clients and Foodbank clients to address financial hardship by working in partnership as above with other providers to address debt and to access other financial inclusion provision.
- Co-producing a peer to peer train the trainer programme for young people on financial awareness.
- a programme of financial workshops for communities across the borough, commencing in Grangetown United Community Hub

Middlesbrough Borough Council have developed Corporate Debt Management Policy' which will be presented at the July Executive meeting. The policy:

- Links to breathing space and debt respite an linked to mental health
- Is associated with the stop the knock programme of work – linking people to sources of support at the point of contact with the council
- Covers the provision of increased support and signposting for those struggling
- Covers provision of a single point of contact for those with multiple debts to ensure coordinated response- this also reduces anxiety for the person in debt and enables relationship to be built whereby the root of the debt is more likely to be disclosed and supported.

The council are also driving forward approaches to:

- Provide an extension of emergency financial assistance and welfare provision

- Proactively identify individuals and families requiring financial support/safety net through identification and evaluation and deep dive into cause of debt and whole system response
- Ensure continuity and consistency of access to comprehensive advice

b) South Tees Wellbeing Network

- The South Tees wellbeing network offered its soft launch event webinar earlier this year to a wide audience of front line associations, providers and partners within the broad wellbeing community for South Tees. The 3-hour event (3 webinars) included (1). Introduction to the network, led by South Tees Public Health, (2) 'What is Wellbeing' led by Joanne Smithson from the What Works Centre for Wellbeing, outlining how wellbeing can be defined, planned into community development and evaluated. (3) Q&A session with Mark Adams, South Tees Dph, discussing the importance of wellbeing approaches and measures. A 100+ wide range of participated in the webinars.
- The webinars were recorded and can be viewed on the links below.
 - Intro to the network – Richie Andrew and Sharon Chappell - webinar 1 link - <https://youtu.be/FuibsxABC-g>
 - What is Wellbeing – Joanne Smithson – What works Centre for Wellbeing webinar 2 link - <https://youtu.be/8jU96OF158U>
 - Wellbeing network, an audience with Mark Adams, DPH for South Tees - webinar 3 link - <https://youtu.be/Ox5Q2y4ensk>
 - A memberships platform is being maintained with now over 500 contacts listed, with long term memberships anticipated to be in the thousands. Following IT approvals the network should be fully operational

c) Community Service Transformation South Tees:

Co-production with Communities / Service Users and Carers:

- Workshop undertaken on the 02nd July to explore co-production and the best way of achieving this across the system
- TEWV are working with South Tees Healthwatch in relation to community models
- Funding allocated to Healthwatch to undertake engagement exercises with local populations through their community champions – this will involve focus groups/ survey monkeys etc
- Community Champions will be part of a model workshop in October to inform and guide.
- Healthwatch have offered to come back once new service model is in place to review services from a community champion perspective.
- Recruited 17 volunteers from Teesside University to support the work on an ongoing basis
- Crisis Focus Group - the group has good representation of service users, carers & family, peer workers and staff. Meets every 6-8 weeks as a check and challenge, engagement, seek views and share updates and new ideas

System Engagement:

April

- Officially launched community transformation last week in April.
- This involved representatives from the broader mental health service system (Redcar attendance 63 attendees/ Middlesbrough 74 attendees)

June

- Workshops held with local authority areas to discuss challenges from a service and service user perspective / community assets and how areas would like to see community transformation taken forward
- Redcar attendance 22/ Middlesbrough attendance 18
- Workshops have centred around key themes such as:
 - Workforce- skills / recruitment and retention
 - DNAs (did not attend- not forgetting about this vulnerable group)
 - Communications – navigating the system and educating differences between mental illness and mental health. One comment was '*community instead of GP*'
 - Wrap around care for patients while waiting to be seen
 - Governance structure going forward
 - Accessibility
 - Estates
 - Suggestions of colocation or community hubs for joint working

Service Developments:

- Mobilisation of the new workforce for Primary Care Practitioner Mental Health roles has begun. This was based upon a pilot in several practices which evaluated extremely positively. A number of staff have now been appointed to work in the practices. The video on the link shows professionals talking about their role and the impacts <https://vimeo.com/568447317/118172f4c3>
- Resilience Funding allocated to each LA area to support communities impacted by covid. RCVDA and MVDA are the hosts and coordinators of this funding which is out for applications now.
- Peer workforce in place and expanding in crisis services and to support hospital discharge
- Peer Carer offer is also operational in Crisis – comms has been shared on social media, websites and media/local press
- 6 month evaluation for Humankind to measure the model and impact is underway. Peer, staff & service user surveys have been completed to collect experience feedback to inform the evaluation
- Street Triage - staff to be based at Middlehaven with police from July.
- Continue to work with Cleveland police to scope the PCSO work
- Listening service evaluation continues- 12 month activity shows 13,662 calls received, seen a 45% increase in calls since service went live. Last 3 months data shows on average 55 calls are received per day

Next steps:

- June- September continued mapping and information gathering to support overall system awareness
- Mental Health and Wellbeing Alliance Workshop (September) to inform system priorities and workplan – will include focus on population health / Trauma Informed Care
- BAME Link worker role being developed
- New Crisis VCS model continue to work with procurement to advertise tender
- October to Jan 2022 is design phase for new TEWV community model

4.2.3 Home First Programme Update

We are working towards embedding Home First culture across the system. There has been an over reliance on acute, community and care home beds rather discharging people home and providing services for people in their own home. This results in in-patients deconditioning and requiring a greater level of care post discharge. Those patients who are discharged home need access to the right health and care support to aid their recovery and independence, therefore avoid deterioration and readmitting to hospital

South Tees Home First System Vision is to:

- *Provide quick and easy access to support at times of crisis, so people can receive the right care at the right time in the comfort of their own home, rather than in hospital.*
- *Ensure patient flow is well coordinated and ensure all efforts are made to support people to return home to recover, regain their confidence and maintain their independence*

We have identified key workstreams to help delivery of our Home First vision:

- Development to optimise Discharge Pathways for patients
 - 0 – Home with some home from hospital VCS support if needed
 - 1 – Needs can be met safely at home with care support
 - 2 - Unable to return home yet, requires ongoing rehabilitation/reablement
 - 3 – Unable to return home, has complex needs and requires ongoing care
 - End of Life – supporting people to die in their preferred place of death
- On-going development of the Integrated Single Point of Access and Integrated Discharge Teams
- Reducing Lengths of Stay in hospital
- Discharge to Assess Pathways
- Development of a System Performance Dashboard

New programme governance arrangements have been put in place to ensure and monitor delivery:

- **Weekly Home First System Operational Group** – meeting of system operational leads to escalate any issues, develop new proposals and recommendations and monitor performance data
- **Monthly Home First Programme Board** - a South Tees Health and Social Care system strategic group for ensuring better patient flow through the hospital and out into the community. The Home First Programme Board has responsibility for delivery, assurance, oversight and coordination of the Home First Strategy and associated improvement plan and projects
- **Monthly South Tees Executive Governance Board** – manage performance and hold to account programmes of work reporting into the Board to include the Home First Programme Board

4.2.4 South Tees Carers Strategy

At the meeting in April, the Health and Wellbeing Executive received and endorsed the South Tees Carers Strategy and accompanying action plan, developed by Redcar & Cleveland Borough Council, Middlesbrough Council and Tees Valley Clinical Commissioning Group, who together form the South Tees Joint Commissioning Group for Carers Services in South Tees.

The Strategy has been prepared in consultation with South Tees Carers Forum, which consists of over 100 representatives from organisations across South Tees, including: Redcar & Cleveland Borough Council, Middlesbrough Council and Tees Valley Clinical Commissioning Group; Carers and organisations supporting Carers; children's and adult social care services; public health; voluntary and community sector organisations and networks; primary and acute care providers; education, employment and skills; business; and housing.

The vision of the strategy is that, through a joint commissioning approach, an equitable and efficient offer is provided for Carers across South Tees, ensuring that local authority boundaries do not represent boundaries to services. At the same time a collaborative approach to services aligns with the priorities of the Live Well South Tees Health and Wellbeing Board and the strategic vision for joining up health and social care.

There is a commitment to ensuring Carers are supported across South Tees in a joined-up and inclusive approach which will:

- Value Carers as real and expert partners in care
- Ensure Carers have access to a wide range of support and supportive opportunities
- Focus on prevention to help avoid Carer breakdown
- Raise awareness amongst the public and staff
- Work in partnership and Integrate our ways of working
- Develop a Strengths Based Approach to build on individual Carer's strengths and resources to make positive personal change

The National Carers Action Plan 2018-20 contains key strands that are based on evidence and feedback from Carers. To ensure South Tees works in line with local and national priorities, the strategic aims are based on the five themes in the National Plan with a focus on the specific needs of Carers in our region.

The five themes and focus of the action plan are:

1. Services and systems that work for Carers
2. Employment and financial wellbeing
3. Supporting Young Carers
4. Recognising and supporting Carers in the wider community and society
5. Building research and evidence to improve outcomes for Carers

The Health and Wellbeing Executive will receive updates on progress.

4.2.5 Forward Work Programme

Attached separately.

5 RECOMMENDATIONS

- 5.1** That Live Well South Tees Health and Wellbeing Board:
- Are assured that the Board is fulfilling its statutory obligations
 - Note the progress made in implementing the Board's Vision and Priorities

6 BACKGROUND PAPERS

- 6.1** No background papers other than published works were used in writing this report.

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