

Haringey Borough Partnership Update

June 2023

Maximising impact of Borough Partnership

Priorities following November/December stock-take

- Deliver improved outcomes through clear and limited number of strategic aims in our partnership areas, delivery plans and agreement on how to measure impact
- Strong focus on prevention, early intervention and integration at the heart of all our work
- Early support for mental health as the ‘golden thread’ across all work areas
- Improved joint working at interfaces across health / MH providers, social care, wider council services & VCS
- Clinical and professional leadership to support and guide operational delivery
- Join up between strategic ambitions and delivery ‘on the ground’

What we've done

- Agreed outcomes for each partnership board, driver diagrams – areas to focus on for improvement
- Started work on how we will measure outcomes and indicators
- Mapped sub-groups to ensure working groups / task and finish in place for delivery
- Senior operational groups being set up / established for focus on joint working particularly around admission avoidance and step down
- Appointed multi-professional clinical leads for Start Well, Live Well, Age Well and GP neighbourhood leads. Assigned a clinical lead and GP neighbourhood lead to each group.
- Delivery work has continued through this process e.g.
 - Start Well - Vaccinations and immunisations Delivery Plan and Speech Language and Communication Universal Offer development.
 - Live Well – Development of Community Mental Health Offer (additional posts agreed), Borough Partnership Test and Learn, Council Commissioned Services Review, positive changes in primary care management for long term conditions
 - Age Well – Operational group implemented, discharge process improvements, Long Term Conditions programme,
 - Neighbourhoods – Approval for Wood Green Integrated Hub, new delivery board in place, North Tottenham improve integrated offer, Health inequalities and Community Chest

Health & Wellbeing Board



Haringey Borough Partnership Exec

Co-chair: Andy Donald (CEO Haringey Council), Helen Brown (CEO, Whittington Health)

Start Well

Live Well

Age Well



Neighborhoods and Health Inequalities

Community and Preventative Mental Health

Giving children and young people the best start in life (0-25 years)

CYP health care and MH ops oversight group

Improving the health and wellbeing of working-age adults (aged from 16 to 65)

MH Ops Oversight Group

Adult Ops Oversight Group

Working together to support people with frailty (mainly aged over 65) to live and age well

Neighbourhood delivery

Reducing inequality in outcomes; embedding joint working

Mental health and wellbeing for young people

Speech language and communication

Autism Pathway

Community mental health and wellbeing

Inclusion health

Staying well and healthy

Frailty pathway

Out of hospital support

Maximising impact of work to reduce health inequalities

Joint working at neighbourhood level

Enablers of integration

Long term conditions (Chair Sharon Seber)

Screening, vaccinations and immunisations (Chair Damani and Rachel)

Board Chair: Ann Graham, Vice-Chair Rachel Lissauer

Board Chair: Beverly and Natalie

Board Chair: TBC

Board Chair: Jonathan Gardener/
Richard Gourlay

Key changes to note

- Long term conditions group (already in place) now reflected in Borough Partnership structure and will report into a joint meeting of Live Well and Age Well
- Screening, Vax and Imms meeting (already in place) now reflected in Borough Partnership structure. Highlight report will be produced to report into various boards (covers all ages)
- Place Board re-named Inequalities and Neighbourhood Board to better reflect focus

Work in progress

- Outcome measurement work still to be finalised and joint analysis & monitoring arrangements to be established
- Alignment of our approach with the population health strategy
- Chairing arrangements, ToR and membership need to be confirmed for operational groups
- Engagement and co-design to be embedded throughout the structures depending on workstream/activity
- Workforce – development of the training hub and developing a workforce delivery plan
- Agreement of roles of clinical leads, neighbourhood leads & roles in supporting delivery

Implications

- Reducing frequency of strategic partnership boards to allow time for delivery and operational focus. Partnership boards to be quarterly
- SROs and leads should be seen as having system leadership remit
- Borough partnership will need continued programme leadership for all our delivery areas
- Ensure links into the NCL structures/strategies etc e.g. ICS pop health strategy
- Risk of instability/reduced capacity/loss of history in light of ICB change programme. Need to consider how all partner organisations align staff to borough partnership delivery

Live Well Partnership Board
Beverley Tarka & Natalie Fox - SROs

Improving the health and wellbeing of working-age adults

Age Well Partnership Board
[SROs tbc]

Takes multi-agency life course approach to support Haringey residents to age well

Mental health operational group

- Operational performance
- Council and Trust joint work
- Discharge/acute
- Escalations
- Roger Sylvester (Canning Cres)
- Financial planning

LD operational group

- Operational performance
- Quality and operational escalations
- Financial planning

Mental Health Programme Group

- Prevention and early intervention
- Integrated community transformation including primary care
- Crisis avoidance

Inclusion Health Programme

- Severe and multiple disadvantage
- Homelessness, housing needs and health
- Employment and health
- Migrant health
- Aligned to Combating Drugs Partnership

Long Term Conditions Programme

- Prevention and early identification of Long Term Conditions
- Anticipatory care
- Pathway development work – focus on CVD, cancer, diabetes

Adult Community Health Services Programme

- Community health investment in therapies and nursing
- Joint oversight on continuous improvement

Frailty programme

- Healthy ageing
- Dementia pathway
- Carers support
- Falls prevention
- Long term care
- End of life

Adults Operational Group

- Admissions avoidance
- Integrated front door & single point of access
- Discharge to assess & reablement
- FINANCE REVIEW

Start Well

Ann Graham, Rachel Lissauer - SROs

Children's Operational Oversight Group

- Ops level discussion of children's mental health issues
- SALT and community service issues
- Social care – support for hospital discharges
- Issues relating to cyp known to range of services

CYP Mental Health and Wellbeing Exec (Thrive Board)

- Early help and support
- Access and services
- CAMHS transformation initiatives

SEND Executive

- Delivery of SEND strategy
- Safety Valve implications
- Focus on autism waiting times
- Oversight and monitoring of SEND Action Plan
- Transitions and preparing for adulthood

Haringey Community Services Transformation Programme

- Performance review for community services
- Delivery of community services investment
- Monitoring and impact

Speech, Language and Communication programme

- Delivery of SALT transformation programme
- Oversight of impact and progress

Early Help Partnership Board

- Family Hubs
- Oversight of delivery of early help strategy

Early Years

- Oversight of Early Years strategy in relation to HV, SLCN

Health Inequalities

Jonathan Gardner and Richard Gourlay SROs

Tackling inequalities and integrating care at a neighbourhood level to support improvements in outcomes

Neighbourhood Delivery Group

- Developing ways of using data and insights to support early identification
- Making sure hubs are running well
- Organisation of integrated workforce / ways of working
- Carrying out coproduction and VCS delivery within neighbourhoods
- Maintaining links with family hubs
- Progress on specific neighbourhood workstreams
 Northumberland park, BWF, Wood Green

Information and insights sub-group – monitoring impact, targeting interventions

Haringey Estates Forum – jointed up approach towards estates, oversight of key programmes of work

Investment sub-group - planning and oversight of inequalities investment, community chest etc

Joint approach to public estate



Integrated data and insights



Integrated workforce



Co-production



Aligned and coordinated VCS



Joined up digital systems



Clear and streamlined comms



Aligned budgets



Joined up management and oversight



Borough Partnership 'test and learn'

The Haringey Borough Partnership (HBP) have agreed that all age **community mental health** is the area for shared focus to develop a roadmap for delegation, taking a test and learn approach.

Haringey Population Mental Health Need



For example

Severe Mental Illness diagnosis in Haringey:
1.4% or 4,400 people (cf. London: 1.1% and England, 0.9%)

For example

Depression prevalence (18yrs+): 9%
- 24,000 people
- 4,800 children and young people aged 5-15 have a diagnosable mental health condition

Adult population: 191,300 residents aged 15 to 64yrs (2021 Census)

27,700 residents aged 65+ (2021 Census)

- Adults reporting social isolation: 46%
- Adults reporting loneliness: 34%

Our ambition is to transform the outcomes and experience of people who have both long- and short-term mental health needs. We have recognised that, as a borough, we need a stronger and more joined up approach towards mental health that is more focused on **early support and prevention**.

Borough Partnership 'test and learn'



Work underway as a foundation for this includes:

Developed priorities for outcome improvement

Improving borough oversight and understanding of community MH investment and transformation work

Commissioned 31Ten to conduct a critical analysis of Council commissioned services

Workshop held at the end of Feb to map preventative and community-based MH services and assess gaps and MH was a key topic discussed at HWBB in March

Embedding MH into our neighbourhood/locality working programme

Reviewing our section 75's over the next 6 months – all contracts for ICB and council

The aim of this work is:

- To ensure we have a shared and deep understanding of the 'as is' across the system
- To collectively understand the strengths, weaknesses and opportunities in our preventative mental health offer
- To share an understanding of the resources we're all putting into our mental health offer, particularly the community based MH offer
- Identifying the practical initiatives and changes that are required to address key challenges and ambitions to ensure we better meet the needs of our residents whilst delivering value for money
- To use this understanding to think through what actions we would want to take as a borough and what types of delegation this would involve

As a partnership we are considering widening the scope of the review work across the system and commissioning an organisation to facilitate a series of workshops over a six-month period to bring together key stakeholders to further develop our shared ambition for local mental health services and identify the key areas for investment, development and potential delegation.

Questions for Health and Welling board

- Do HWBB endorse this as a direction of travel?
- What else could we consider doing to maximise delivery of the Borough Partnership?