

Report for:	Health and Wellbeing Board – 13th January 2015
Title:	Health and Care Integration Update
Report Authorised by:	Zina Etheridge – Deputy Chief Executive, Haringey Council and Sarah Price – Chief Officer, Haringey CCG
Lead Officer:	Asad Butt, Integration interim programme manager

1 Describe the issue under consideration

- 1.1 This paper provides an update to the report brought to the Health and Wellbeing Board of the 30th September 2014 and proposes a governance structure for the programme.

2 Cabinet Member introduction

- 2.1 Supporting everyone to be healthy and have a high quality of life for as long as possible is a core aim for the Council and its partners. Integrating health and social care so that care is person centred, joined up and meets their needs is core to that vision. The establishment of the health and social care programme is an important step towards delivering that integration. The proposed governance model set out in this paper will ensure that the programme is effectively governed and has strong strategic input from the HWB.

3 Recommendations

- 3.1 The HWB is asked to note progress made to date.
- 3.2 The HWB is asked to note and approve the proposed governance structure in Appendix A

4 Alternative options considered

4.1 None

5 Background information

- 5.1 The Health and Social Care Integration Programme has been established to support Haringey in meeting its vision for Integrated Care, i.e.:
- We want people in Haringey to be healthier and to have a higher quality of life for longer.
 - We want everyone to have more control over the health and social care they receive, for it to be centred on their needs, supporting their independence and provided locally wherever possible. This means:
 - The individual's perspective should be at the heart of any discussions about integrated care
 - When planning and providing integrated care services the individual's perspective should be the organising principle of service delivery
- 5.2 The programme has agreed three key priorities (themes), integrated care for adults, children, and people with mental ill health as the focus for the first phase. These themes align with the outcomes set out in Haringey's Health and Wellbeing Strategy, the Council's Corporate Plan and the 5 year strategy for CCGs in North Central London.
- 5.3 Within each theme, a number of projects / programmes have been identified to deliver the agreed integrated care vision, for that theme. Additionally, the Integration Programme includes cross cutting themes in the areas of technology and finance that will enable and support integration.
- 5.4 Projects/programmes underway in the Adults theme are:
- Better Care Fund: encompassing actions to tackle health inequalities and the life expectancy gap, through a focus on early interventions in long term conditions, and improving mental health and wellbeing, through a focus on choice, control and empowerment. For the first year, focusing on integrated service for frail older people (65+) to enable them live independently.
 - Value Based Commissioning: establishing models and approaches to commission services based on values / outcomes rather than activity; working in partnership with Enfield CCG.
- 5.5 Projects/programmes underway in the Childrens theme are:
- SEND reforms Programme: implementing the changes set out in the Children and Families Act regarding special educational needs and disabilities (SEND) which came into effect from September 2014.

- Early Help Project (input): Providing input into the Childrens project considering the range of provision often described as prevention, early intervention and targeted early help, which may be delivered by universal services or by commissioned services.

5.6 Projects/programmes underway in the Mental Health theme are:

- Mental Health Strategic Framework: setting the strategic direction and implementation approach for integrated mental health services in Haringey, covering both adults and children (CAMHS).
- Mental Health and accommodation: Creating a revised pathway for people with mental ill health who require housing support, supported housing or Residential Care.

5.7 The theme leads are working to define the outcomes and outputs at the next level of detail and this progress will be included in the next update to the board.

5.8 The Health and Care Integration Programme has consolidated existing Integration projects and proposes the governance framework (Appendix A) to enable greater collaboration and effectiveness across Haringey.

5.9 The breadth and depth of the Integration Programme is such that it requires different levels of specialist and detailed attention and steer. To ensure the appropriate people are involved, the governance structure consists of three layers,

- Strategic
 - Set the vision and ambition for integration in Haringey
 - Provide guidance and strategic direction
 - Make strategic decisions (impacting vision and direction of travel) within the agreed scope and principles
- Steering
 - Have the ultimate oversight of the Integration Programme
 - Steer the Integration Programme and associated projects
 - Ensure progress on track to achieve the agreed vision and goals set out for integration in Haringey
 - Make management decisions (enabling the programmes and projects to continue) within the agreed scope and principles
- Operational
 - Manage and direct projects (at an operational level)
 - Agree proposals for operationalisation of the integration plan which are developed through the projects
 - Ensure the projects are on track and progressing as expected

- Make operational project decisions, within the agreed scope and plan, enabling the project to continue to deliver

5.10 This layered governance structure aligns with the existing governance that is already in place within the Council and the CCG.

5.11 The governance structure will be supported by quarterly updates via presentation or paper to the Health and Wellbeing board

6 Comments of the Chief Finance Officer and financial implications

- 6.1 Not applicable at this stage. As a next step further work will be completed to scope the Programme and associated projects, as well as to determine any financial implications. This scope and financial implications will be discussed and agreed with the appropriate stakeholders in the respective organisations.
- 6.2 The result of this scoping work with any comments from the Chief Finance Officer(s) will be included in the follow up presentation/ paper to the next meeting.

7 Comments of the Assistant Director of Corporate Governance and legal implications

- 7.1 The Council's Assistant Director of Corporate Governance has been consulted about this report.
- 7.2 The Health and Care Integration programme is conducive to the Board's statutory duty to encourage integrated working between commissioners of NHS, public health and social care services for the advancement of the health and wellbeing of the local population (Section 195 of the Health and Social Care Act 2012). The Integration Programme is also conducive to the Council's and the CCG's statutory powers to promote integrated commissioning and provision of services in health and social care. These powers are set out in Sections 75 of the National Health Services (NHS) Act 2006 (as amended) (arrangements between NHS bodies and local authorities for the delegation of functions), Sections 13N and 14Z1 of the NHS Act 2006 (14Z1 Duty as to promoting integration), Sections 25 and 26 of the Children and families Act 2014 (Education, health and care provision: integration and joint commissioning) and Section 3 of the Care Act 2014 (Promoting integration of care and support with health services etc)

8 Equalities and Community Cohesion Comments

- 8.1 The proposed Health and Care Integration Programme is designed to provide health and social care services that produce better outcomes and a better experience for all local people. As a result it serves the interests of all protected groups, whose health and wellbeing it promotes, and is aligned with the Council's commitment to equalities.
- 8.2 Equality impact assessments will be carried out as part of the project planning and delivery process.

9 Head of Procurement Comments

- 9.1 N/A There are no direct procurement implications arising out of this report however as and when the projects identify procurement requirements the appropriate processes will be followed.

10 Policy Implication

10.1 There are no direct policy implications arising out of this report however national policy is a key driver of integration especially from the Better Care Fund and Care Act Implementation and this programme of work will complement and add value to work under this remit.

11 Reasons for Decision

11.1 The proposed governance process provides clarity as to how the Health and Wellbeing Board will provide strategic direction and decisions for the Health and Care Integration Programme.

12 Use of Appendices

Appendix A: Proposed Governance Structure

13 Local Government (Access to Information) Act 1985