Report for: Haringey and Islington Health and Wellbeing Board Joint Sub

Committee

Title: Haringey and Islington Wellbeing Programme Partnership

Agreement

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CCG

#### 1. Describe the issue under consideration

The Haringey and Islington Wellbeing Partnership Agreement commits the organisations that provide and commission health and care across our Boroughs to working as an inter-dependent system. The agreement sets out a range of behaviours and actions that will be taken by all agencies over the next year. The intention is to work together on areas that can be advanced more quickly and/or more efficiently together. This report updates the Board on the progress made in securing signatories to the Agreement and the next steps in the delivery of the commitments in the Agreement.

#### 2. Recommendations

The Haringey and Islington Health and Wellbeing Board Joint Sub-Committee is asked to:

Note that the Partnership Agreement (copy enclosed as Appendix 1) has been signed by both Islington and Haringey Councils, the CCG Governing Bodies for Islington and Haringey, University College London Hospital and Whittington Health. Haringey and Islington GP Federations have also agreed to sign the Agreement and to work with the Wellbeing Partnership, noting that the Federations are signing as organisations rather than on behalf of individual member practices.

#### 3. Background information

- 3.1 The Wellbeing Programme has set out a series of objectives to address the health and care needs of the population:
  - To take a whole population approach to health and care delivery;
  - To support all of our residents to achieve healthier, happier and longer lives, with a focus on preventing poor health and improving outcomes when people need care and treatment;

- To support people to stay and be healthy, to reduce the level of ill health within our population;
- To simultaneously focus on improving outcomes and reducing costs for population groups who are currently high consumers of health and care.
- 3.2 By working more collaboratively, partners are aiming to go further than they are currently able to transform services across the health and care system for the people of Haringey and Islington.
- 3.3 The Partnership Agreement received and incorporated feedback from informal Governing Body and Trust Board meetings prior to sign-off. However, it is still a 'live' document and will be reviewed again for April 2018.
- 3.4 It is useful to give some examples of what this collaborative work involves and how joint working is being used 'on the ground' to strengthen our ability to address shared priorities. Some examples are set out below.
  - Out of hospital care: Haringey and Islington have committed to work together on simplifying the discharge process and ensuring that people waiting to leave hospital have assessments in their own home environment wherever possible. We have also agreed to align our rapid response admission avoidance services and, in the long term, to jointly plan how our intermediate care beds are used. This is allowing shared learning and coordiantion. Haringey has been piloting the simplified discharge process at North Middlesex for several months and the lessons learned are being carried across to Whittington Health. Both Haringey and Islington have admission avoidance services and the best elements of these are being shared with a view to developing a single model that is cost effective and allows a more standardised approach between boroughs, which is part of our commitment to simplify and consolidate our out of hospital offer. Our intermediate care bed capacity across both boroughs is also being assessed and a joint approach will enable us to do this work once and to take a shared view of how we best align our bed capacity to need.
  - Diabetes and CVD: A diabetes steering group exists across both Haringey and Islington with good clinical involvement both from GPs, specialist nurses and diabetologists from all Trusts. The group is working on a set of test-and-learn quality improvement projects as part of a joint diabetes programme. These projects are to reduce variation in achievement of the NICE recommended treatment targets for diabetes management and increasing uptake of structured education. There is investment coming into this area to support improvement of diabetes care and our joint working is allowing us to have a structure to take this transformation forward together. The Haringey and Islington public health teams put forward a successful bid to the British Heart Foundation for a community blood pressure testing project. The plan is for 5,000 blood pressure tests to be delivered each year across Haringey and Islington through voluntary sector partners including, Bridge Renewal Trust, Tottenham Hotspur Foundation, Embrace, Manor Gardens and Octopus. North Central London has also been successful in bidding for transformation funding for improving three key treatment targets (blood pressure, cholesterol and blood sugar). The funding will be used to improve the quality of diabetes care by funding diabetes

- quality improvement support teams across both boroughs. The diabetes steering group will be in a position to advise on and, where necessary or desirable, to lead the implementation of these developments.
- 3.5 The next steps for the Wellbeing Partnership are both to continue with the operational work that has been started where we can best deliver improvements by working together whilst also positioning us, across organisations, to work together at a strategic level in line with the principles that were set out in the Partnership Agreement:
  - Partner organisations will work together for the benefit of local people;
  - We will involve local people in our design, planning and decision-making;
  - Partner organisations will find innovative ways to cede current powers and controls to explore new ways for working together;
  - We will be open, transparent and enabling in sharing data, information and intelligence in all areas including finance, workforce and estates;
  - Partner organisations have agreed to find ways to 'risk share' during transformational change;
  - We will find ways to share joint incentives and rewards;
  - Partner organisations will make improvements by striving to be the best, together;
  - We will be rigorous in ensuring value for money and financial sustainability.
- 3.6 Within the Partnership Agreement we agreed to deliver a set of ambitions that will help us to enact these principles. These ambitions include:
  - To develop a single Health and Wellbeing Strategy for the boroughs of Haringey and Islington
  - To share each organisation's transformation programme with partners
  - To establish joint work on council transformation programmes and peer review priorities
  - To bring significant investment / disinvestment decisions (eg over £250k) to the Partnership Board to enable partners to understand the impact such changes might have. This does not fetter an organisation's independent decision making autonomy but ensures one organisation does not make unexpected changes which negatively impact upon another.
  - To establish system wide budgets for specific services eg for diabetes, MSK, to support the transformation work of the individual work streams
- 3.7 Partners will be aware that these are ambitious targets and timescales have been set for achievement within the Partnership Agreement. These ambitions are being translated into a delivery plan which will be reviewed by the Sponsor Board at its next meeting and on an ongoing basis.

### 4. Contribution to strategic outcomes

4.1.1 The Wellbeing Partnership contributes towards the strategic outcomes set both by Haringey and Islington's Health and Wellbeing Boards: Ensuring every child has the best start in life; reducing obesity; improving healthy life expectancy; improving mental health and wellbeing and reducing health inequalities. It is expected to contribute towards delivering high quality, efficient services within the resources available.

### 5.1 Legal

The Wellbeing Partnership Agreement sets out a number of commitments and targets by partners aimed at fostering a collaborative approach in strategic planning and decision making and to improve the health and care economy for residents across Haringey and Islington.

The commitments as they are developed and progressed may require formal partnership agreements between some or all the partners and will need to be managed in accordance with the partners constitutional and decision making framework.

Overall, the push in the agreement towards more collaborative working is in accordance with health and social care legislations which actively promotes health and social care integrated working and partnership arrangements to improve the health and wellbeing of residents.

The Committee has strategic oversight of the Wellbeing Partnership arrangement.

## 5.2 Finance

Whilst the agreement proposes to align budgets and practises at a future date, there is currently no commitment to amounts at this stage, therefore it does not impinge on the Medium Term Financial Strategy.

It is anticipated however that these proposals will deliver efficiency savings in the longer term and be tabled in support of the Council's overall budget position.

When formalised proposals are available at a later date, these will be presented for agreement and subject to financial analysis where comments can be made.

#### 5. Environmental Implications

Not applicable at this stage

#### 6. Resident and Equalities Implications

Not applicable for this report. Equality Analysis will be a vital part of ensuring the programme delivers improvements across our diverse population and does not impact negatively on any specific groups.

# 7. Use of Appendices

Partnership Agreement is attached as Appendix A