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#healthyplym

Democratic and Members Support

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HEALTH AND WELLBEING BOARD – TO FOLLOW

Thursday 30 July 2015

10.00 am

Warspite Room, Council House

Members:

Councillor McDonald, Chair
Councillors Mrs Bowyer and Ian Tuffin.

Statutory Co-opted Members: Strategic Director for People, NEW Devon Clinical Commissioning Group representatives, Director for Public Health, Healthwatch representative, NHS England (Vacancy).

Non-Statutory Co-opted Members: Representatives of Plymouth Community Homes, Plymouth Community Healthcare, Plymouth NHS Hospitals Trust, Devon Local Pharmaceutical Committee, University of Plymouth, Devon and Cornwall Police, Devon and Cornwall Police and Crime Commissioner and the Voluntary and Community Sector.

I refer to the agenda for the above meeting and attach the presentation on Plymouth Integrated Commissioning Board (PICB) Commissioning Intentions as referred to in agenda item 10.

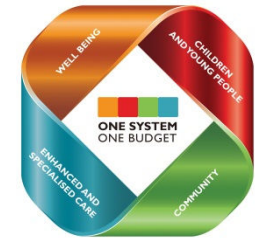
Tracey Lee

Chief Executive

HEALTH AND WELLBEING BOARD

10. PLYMOUTH INTEGRATED COMMISSIONING BOARD (PICB) COMMISSIONING INTENTIONS (Pages 1 - 20)

The Board to receive the Commissioning Intentions from the Plymouth Integrated Commissioning Board (PICB).



COMMISSIONING AN INTEGRATED POPULATION-BASED HEALTH AND WELLBEING SYSTEM

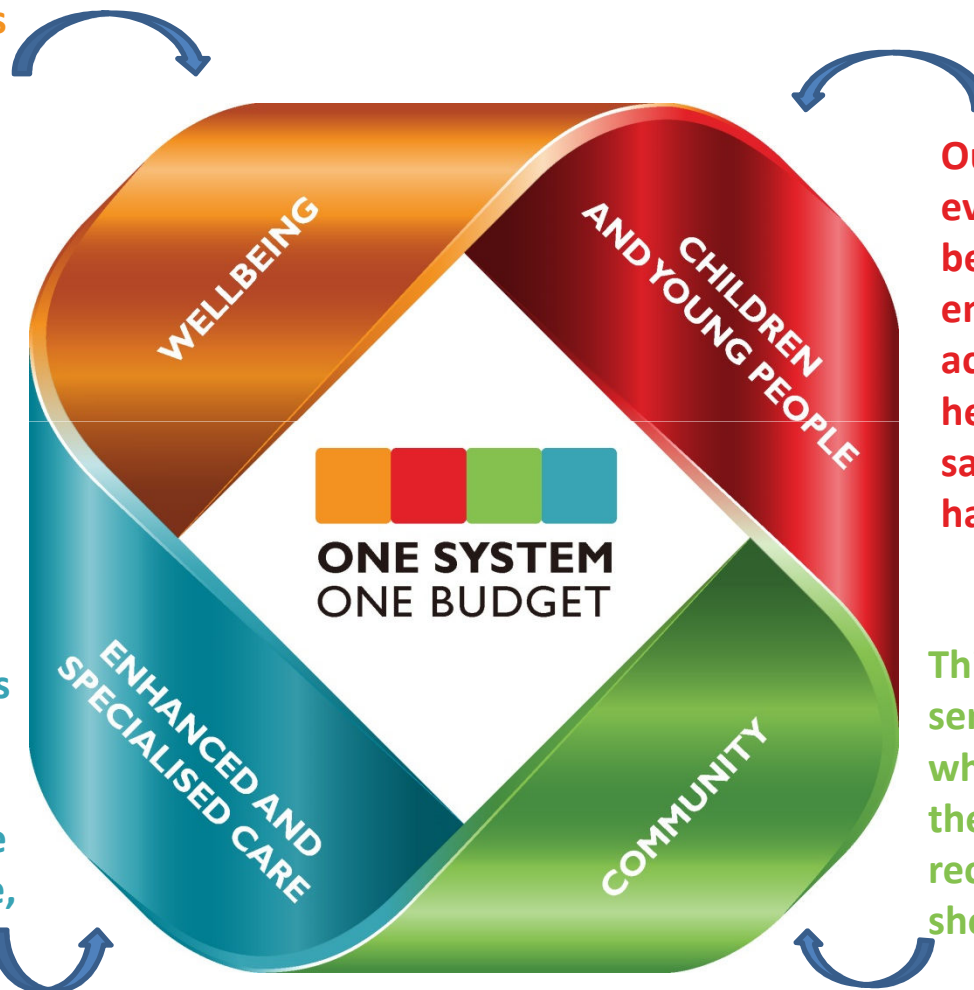
The right care... at the right time ... in the right place

Four strategies



The strategy supports healthy and happy communities by supporting and utilising social networks, increasing investment in public health and putting health and wellbeing at the heart of everything we do.

A system that consists of quality specialist health and care services that promote choice, independence, dignity and respect.



Our ambition is for every child to have the best start to life by ensuring they can access education, health care and are safeguarded from harm.

This strategy targets services for people who need support in the short term to recover from a crisis or short term need.

One System, One Budget - *'the right care, at the right time, in the right place'*

An Integrated Population-Based Health and Wellbeing System



- Aim 1** To improve health and wellbeing outcomes of the local population
- Aim 2** To reduce inequalities in health and wellbeing of the local population
- Aim 3** To improve people’s experience of care
- Aim 4** To improve the sustainability of our health and wellbeing system

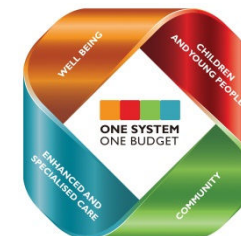
One System, One Budget - *‘the right care, at the right time, in the right place’*

An Integrated Population-Based Health and Wellbeing System



One System, One Budget - *'the right care, at the right time, in the right place'*

Wellbeing



Aim 1 We will sustain the improvement in healthy life expectancy and health inequality and reduce both all-age all-cause deaths and deaths due to cancer, stroke, heart disease and respiratory disease

Aim 4 We will have rebalanced commissioning spend from reactive & unplanned to planned & targeted investment. Over the course of this strategy we expect the percentage of spend on prevention and health promotion to increase.

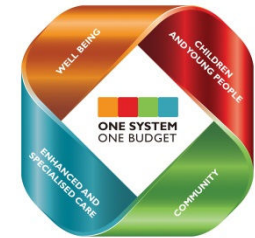
Aim 2 Health improvement & the prevention of ill health will be at the core of our planned care system demonstrably reducing the demand for urgent and complex interventions and yielding improvements in health and the behavioural determinants of health in Plymouth



Aim 3 We will commission only from providers who have a clear and proactive approach to health improvement, prevention of ill health, whole person wellbeing and working with the wider community in which they operate.



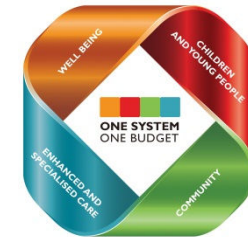
Wellbeing



Scope includes:

- **Planned care**
- **Prescribing**
- **Thrive Plymouth**
- **Empowered communities**
- **Information**
- **Mental wellbeing**

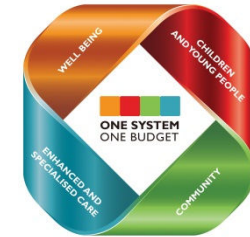
Wellbeing



LINKS TO OTHER STRATEGIES



Community



Aim 1

Provide integrated services that meet the whole needs of the person by developing:

- Single, integrated points of access
- Integrated support services & system performance management
- Integrated records

Aim 2

Reduce unnecessary emergency admissions to hospital across all ages by:

- Responding quickly in a crisis
- Focusing on timely discharge
- Providing advice and guidance, recovery and reablement

Aim 3

Provide person centred, flexible and enabling services for people who need on-going support to help them to live independently by:

- Supporting people to manage their own health and care needs within suitable housing
- Support the development of a range services that offer quality & choice in a safe environment
- Further integrating health and social care



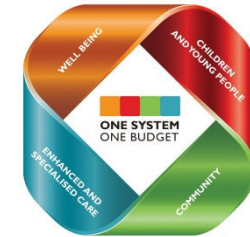
Community



Scope includes:

- **Urgent Care**
- **Services for people with complex, multiple needs**
- **Services for people with long term support needs**

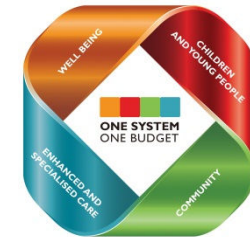
Community



LINKS TO OTHER STRATEGIES



Children and Young People



Aim 1

Raise Aspirations: ensure that all children and young people are provided with opportunities that inspire them to learn and develop skills for future employment

Aim 2

Deliver Prevention and Early Help: intervene early to meet the needs of children, young people and their families who are 'vulnerable' to poor life outcomes

Aim 3

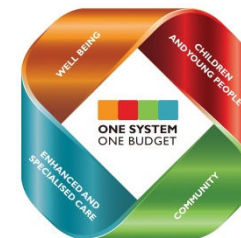
Deliver an Integrated Education, Health and Care Offer: ensure the delivery of integrated assessment and care planning for our children

Aim 4

Keep our Children and Young People Safe: ensure effective safeguarding and provide excellent services for children in care



Children and Young People



Scope includes:

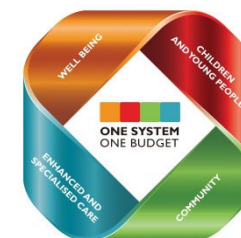
- **Children in or on the edge of care**
- **Early Childhood Development**
- **Children with Special Educational Needs or Disability**
- **Vulnerable Children and Young People**
- **Family Support**

Children and Young People

LINKS TO OTHER STRATEGIES



Enhanced and Specialised Care



Aim 1

Create Centres of Excellence for enhanced and specialist services

Aim 2

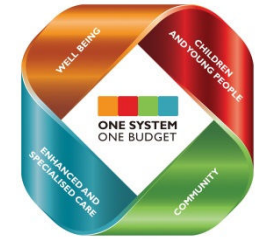
People are able to access care as close to their preferred network of support as possible

Aim 3

Provide high quality, safe and effective care, preventing people from escalating to, or requiring, urgent or unplanned care



Enhanced and Specialised Care

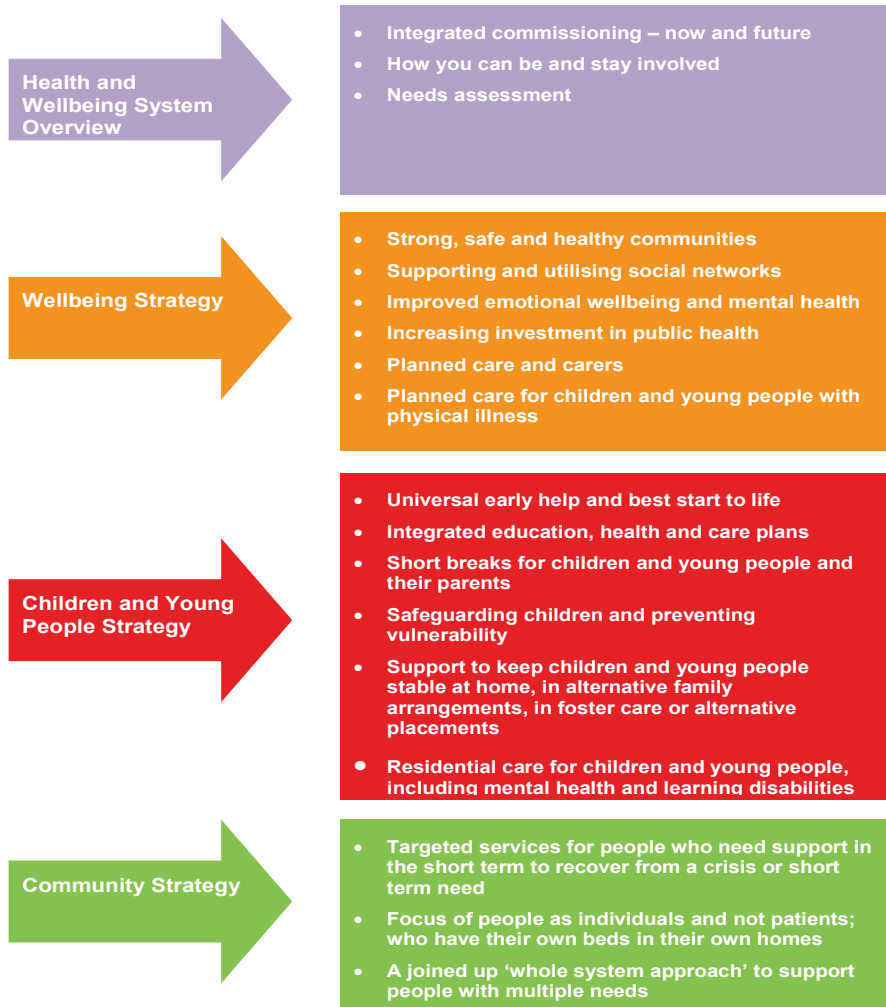


Scope includes:

- **Specialised and tertiary services**
- **Acute enhanced services**
- **Individual patient placements**
- **End of life care**
- **Care homes**

Enhanced and Specialised Care

LINKS TO OTHER STRATEGIES



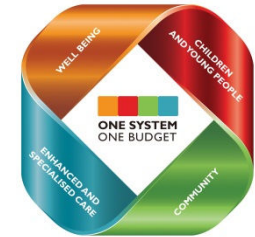
Initial feedback on strategies



- Lots of interest
- Gap in detail as to how primary care can contribute
- Children's strategy needs greater focus on health systems
- Enhanced specialised care would benefit from a focus on what an acute hospital can do as well as what we need
- Gaps: employment, training, work, housing, client group: mental health, substance misuse, sensory disability

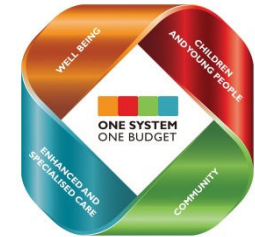
One System, One Budget - *'the right care, at the right time, in the right place'*

Journey to delivery



- Strong platform of engagement
- Strategic drivers
- One-page summary agreed by Governing Body and Cabinet – July 2014
- Developed draft strategies
- Circulated to providers and other stakeholders for feedback
- Liaising with partner organisations
- Second draft to be issued in July
- Health and Wellbeing Board
- Caring Plymouth
- Plymouth Integrated Commissioning Board
- CCG and PCC approval – September 2015 TBC

Core teams



Wellbeing

SRO – Kelechi Nnoaham (PCC)
Commissioning Leads - Karen Kay (CCG) & Katy Shorten (PCC)
Clinical Lead - Dr Ed Parry-Jones
Public Health Lead - Rob Nelder

Children and Young People

SRO – Carole Burgoyne (PCC)
Commissioning Leads - Liz Cahill (PCC) Fiona Phelps (CCG)
Clinical Lead - Dr Shelagh McCormick
Public Health Lead - Julie Frier

Enhanced and Specialist Care

SRO - Jerry Clough (CCG)
Commissioning Leads - Karen Kay (CCG) & Caroline Paterson (PCC)
Clinical Leads - Dr Gary Lenden / Dr Shelagh McCormick
Public Health Lead - Ruth Harrell

Community

SRO – Carole Burgoyne (PCC)
Commissioning Leads - Claire Anderson (PCC) & Sharon Matson (CCG)
Clinical lead - Dr Steve Harris & Dr Dafydd Jones
Public Health Lead - Sarah Lees

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