

# Devon Integrated Care System- Plymouth Local Care Partnership

## “Together for Plymouth”

### Introduction

This paper provides for the Health and Wellbeing Board an overview of the, outcomes, functions priorities and governance arrangements of the Shadow Plymouth Local Care Partnership and our relationship to the Wider Devon Integrated Care System.

### Outcomes

The shadow Devon ICS Board has set down the following aims for each of the LCPs:

1. Deliver Devon system strategies at local level
2. Improve health and wellbeing outcomes for the local population
3. Reduce inequalities
4. Improve people’s experience of care
5. Improve the sustainability of the health and care system
6. Support local engagement including with PCNs

### Functions of Place

As thinking on ICS develops so too does the understanding on the functions of Place with a recent Kings Fund presentation setting out the following:

1. Developing an in-depth understanding of local communities and neighbourhoods
2. Working in partnership across multiple agencies to coordinate service delivery
3. Driving service transformation, particularly for community-based services
4. Mobilising the local community and building community leadership capacity
5. Making use of local assets
6. Enabling local organisations to use all of their resources to support health, social and economic development

Locally the Devon ICS has set down the following activities that each of Local Care Partnerships should focus on:

- Coproduce plan with ICS Partnership Board which will deliver improved health and care services at population level
- Develop integrated services
- Create conditions for healthy living
- Manage resources within available budget
- Plan services through engagement with citizens
- Develop community assets

## Local Priorities

The Plymouth Plan remains the City's overarching Strategic Plan setting the vision, ambition and our direction until 2034. These priorities align to this plan and represent the Local Care Partnerships first tranche of priorities emerging from our COVID-19 response phase towards reset and restoration. They will form the focus of our joint endeavor whilst we develop our wider framework for tackling inequalities.

1. Building on Caring for Plymouth develop a single front door for care and support
2. Develop enhanced support for care homes
3. Strengthening out of hospital care through the Integrated Care Model with a focus on:
  - a. Admissions Avoidance- provision of additional multi-disciplinary community crisis response to provide wraparound support for individuals in crisis.
  - b. Improved access to step down provision to support hospital discharge arrangements including provision of additional beds with on-site therapy offer
  - c. Further development of placed based Mental Health Support aligned to community multi-disciplinary offer wrapped around individual PCN's and supported by the voluntary sector.
4. Ensuring homeless people are housed in appropriate accommodation, have their needs fully met and as few people return to the streets as possible.
5. Working with Primary Care to build on learning from "Hot Hub" approach to ensure sustainable multi-disciplinary provision for COVID and non COVID residents.
6. Collectively and pro-actively support the City's *Resurgam* Programme, with a specific focus on the Health and Care Sector Plan, Skills, Building Plymouth, Spend-4-Plymouth and City Centre Renaissance.
7. Locally support a number of enabling programmes such as digital, workforce and infrastructure and estates. An initial priority in relation to estates will be seeking to maximise the HIP2 and One Public Estate Programmes to facilitate service change and develop new opportunities.

## Our Role in System Working

In order to develop care and support services around people and communities the ask of the wider system is:

- The new system should be built up from place
- The ICS to play an underpinning rather than overseeing role enabling place to develop
- ICS STP to recognise that places will start from different places and evolve at different paces



Recognising this place in the wider Devon system and our relationship with neighbouring partners we will:

- Play an active place based role in the developing Devon Integrated Care System
- Recognising the ICS role in performance improvement we will work to ensure place makes the best contributor it can to system performance
- As leaders of place set down a clarity of purpose- make it simple and articulate why it matters
- Facilitate local mobilisation empowering others to act- and declutter if necessary
- Planning and delivery will be seamless and will utilise strengths across the system
- Be governance light and delivery heavy with rapid decision making (within Frameworks)
- Work in close partnership to align plans with our neighbouring systems in South East Cornwall and Western Devon.

## Governance arrangements

The Shadow governance arrangements are set out in Appendix One. In designing these the following principles were adopted:

- Arrangements should support our Placed Based Health and Wellbeing Agenda
- Arrangements should be an enabler for us to deliver at pace for our population
- Arrangements should build on existing partnerships

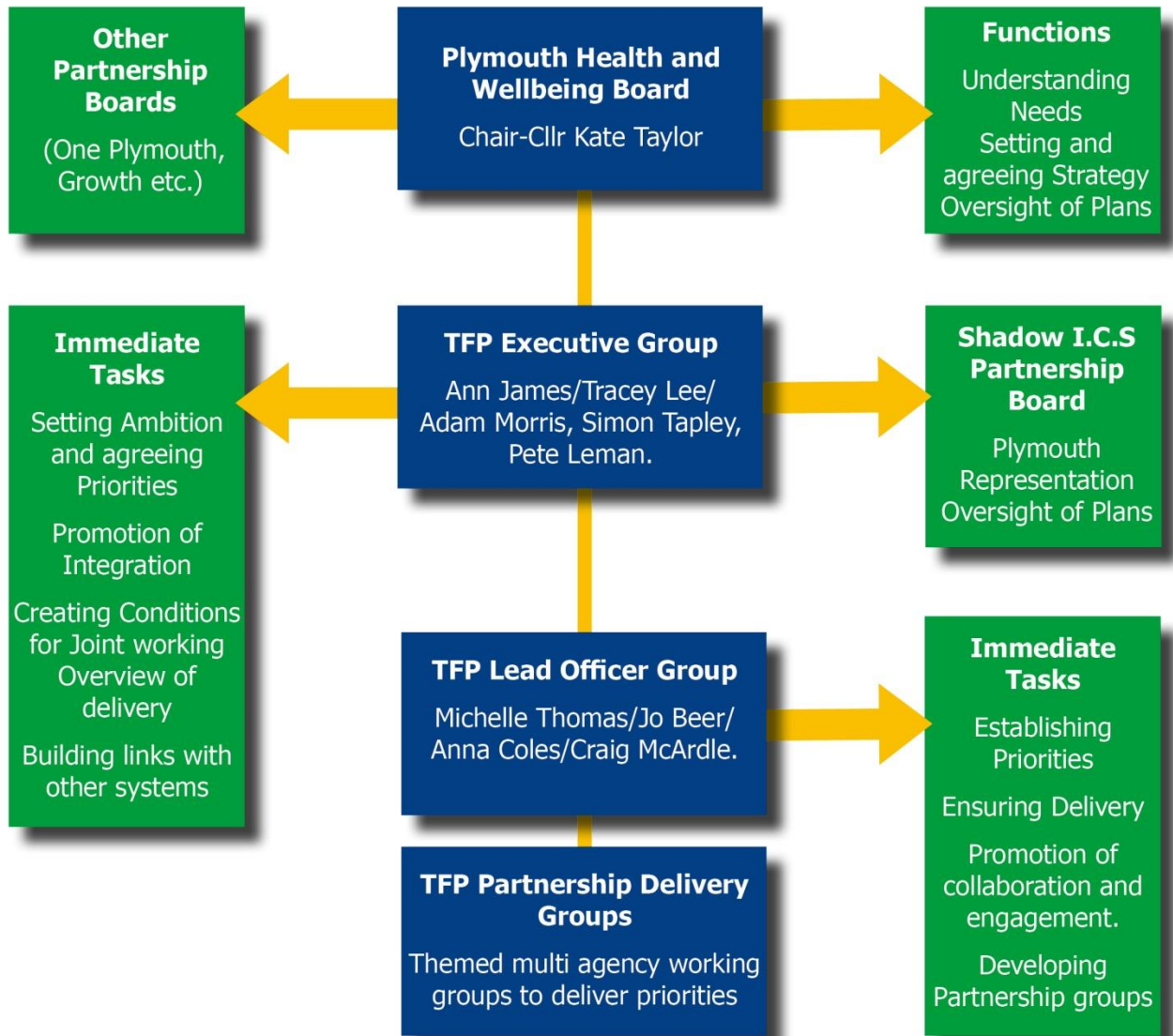
## System Resources

The establishment of the Local Care Partnership has consciously been built into business as usual processes of the main statutory partners. Locally Boards and Executives are already deployed to this agenda with Place being considered the day job. As such partners are already bringing in extensive Accountable/Senior Officer Commitment with dedicated and scheduled time to deliver the Together for Plymouth priorities.

In addition, further resources have been allocated such as Business Support, Communications and Organisational Development. Should additional resources be required to facilitate the development or running of the Local Care Partnerships the then partners have committed to finding additional resources.

## Next steps

As we continue to develop the Plymouth Local Care Partnership there will be a focus on developing the architecture and workings of the LCP and on developing a programme of works that will drive service change, promote integration and improve performance and quality.



**Decision making of each of the governance layers are through individual officer's decision making authorities and organisations own boards.**