

Building Health Partnerships Phase Two

Area Update – September 2015

IVAR



NHS
England

Summary

1. As we near the end of delivery for the second phase of the Building Health Partnerships Programme, significant progress has been made across all six areas: high-level core groups have been formed; lively and productive sessions have been facilitated; priorities and target outcomes have been agreed; and joint action and change is taking place.
2. Of particular note at this stage of the programme is:
 - 2.1 The focus in the six areas is on complex issues - young people and suicide prevention; end of life care; diabetes prevention - that require concerted and creative cross-sector effort.
 - 2.2 The level of buy-in from senior staff from public agencies is exceptional: Local Authority Chief Executives and Directors of Public Health and Clinical Commissioning Groups have shown their willingness and enthusiasm to participate and contribute. Levels of attendance across all six areas have been high; in some cases, more than 50 people have been attending sessions.
 - 2.3 This links to a feeling across all six areas that the need for joined-up working (from diagnosis through design and commissioning and on to delivery) is pressing and urgent, in particular to avoid duplication and overlap (within service delivery) and to bring about a smarter and more integrated approach to funding and service delivery based on local evidence of need.
 - 2.4 However, despite the necessity of collaborative working, it remains challenging and, for many, relatively unfamiliar. So, the need for a patient and incremental approach remains: BHP's balance between relationship-building and joint action continues to be critical.
3. Turning to outcomes, each area is acutely aware of the need for this process to produce identifiable and tangible changes – to relationships, systems, services and costs. As the programme proceeds with more detailed action planning (including the identification of more precise target outcomes and implementation arrangements), each area's change agenda has become clearer. For some, tangible changes have already taken place: Hull's Social Prescribing Scheme tender has been co-designed by a cross sector group. In Bexley BHP has already had a positive impact on integrated commissioning seeing positive outcomes in prevention and childhood obesity. And building on BHP work Bolton CCG has recently announced £400,000 in transformational monies in mental health for children and young people.

However, given the complexity of some of the issues being tackled, much of that change is likely to occur after the planned period of programme delivery (ie. After September 2015). **This raises questions about arrangements for ongoing support with change management as well as the capturing of learning about longer-term outcomes.**

4. Finally, we have been really encouraged by the networking and cross-fertilisation of ideas within and across BHP1 and BHP2 areas. For example: Dudley have presented their work on integration in South Gloucestershire and are arranging a site visit, Dudley have also shared their work on impact measurement with Bexley; and Nottingham has made links with South East Staffordshire and Seisdon Peninsula CCG to learn about their VCSE grants programme.

Bexley

Through the BHP programme, Bexley aimed to increase engagement of GPs and other health providers and commissioners with the wider VCSE, and explore co-commissioning and co-design models that ensure provision of community based and preventative interventions. The Bexley partnership is committed to pushing culture change towards more whole systems thinking, and generating evidence that investing in prevention results in both savings at a later stage and better quality of life for residents. To further these aims, the programme focused on four specific streams of work/ initiatives, all of which have seen significant progress:

- Holistic diabetes support and prevention
- Prevention focus around children and families
- Integrated commissioning approaches
- VCSE, GP and other health professionals collaborating on prevention.

Achievements so far

Diabetes project: A programme board has resolved many of the issues, such as poor understanding of the services available and links between GPs and VCSE. The board has been able to take an overview of the patient pathway, and they are now able to link strategy to commissioning intentions. They are talking with national organisations such as Diabetes UK and colleagues in leisure to ensure best use of assets and avoid duplication.

Review of children and families: A group of 25 stakeholders has been established to focus on the key issues for 300 troubled families. There are three strands running in parallel, across different sites, but with the emphasis on a joined up, seamless experience for families, at an appropriate level of support. A key part of this is the upstream offer – a multidisciplinary team involving the VCSE partners (not statutory) providing a menu of help around domestic violence, mental health, youth etc. The race is on to set up a team to start piloting this in October - running through until March initially - and assess impact.

Engagement with VCSE sector:

- A shadowing programme between a public sector leader and a VCSE director will take place, in order to achieve improved understanding of each other's roles and pressures.
- In order to develop different ideas of working with GPs and to ensure that the latter have confidence in the quality of VCSE services, the voluntary sector has visited six GP surgeries to look at the way services function and consider how it might add value to patients and reduce demand on GPs. Six practices are now on board wanting to replicate the Heath Champions – where VCSE supported volunteer champions have a presence in GP surgeries. A proposal is currently with the Primary Care Practice Group for funding to pilot this and tie the initiative in with the existing Social Prescribing scheme.
- The CCG is holding an event to talk to the voluntary sector about its commissioning intentions – before they are signed off by the governing body – this has never happened before.

Learning from other BHP sites: Dudley shared work on data sharing and impact measurement while Salford shared their experiences of developing a social value pledge.

Expected outcomes

Integrated Commissioning

The BHP projects have meant that the **relationships between partners have strengthened significantly** at all levels – most notably between finance directors in the CCG and Council, as well as between CCG commissioners, council commissioners and the voluntary sector.

Work on an integrated commissioning approach has highlighted that processes are not currently transparent enough to involve the VCSE fully. This issue has not been cracked, but significant steps have been taken: there is now a set of underlying principles, building on the compact. Secondly, the steps required for real involvement of the VCSE in joint commissioning between the CCG and Council have been mapped out, and a flow chart for the needs assessment element of the commissioning cycle has been set out. The next piece of work is ongoing – to do the same exercise for the whole commissioning cycle, as well as to agree a joined up approach to co-design, evaluation and outcomes.

A new way of working

“BHP has already had an impact on the way that the Council and CCG does business; engaging the voluntary sector earlier and ensuring it takes part in the operational development of our business, not just ‘consulting’ on decisions that have in practice already been made. The council and CCG now sit with GP Practice Managers and GPs on the Primary Care Development Group – allowing the VCSE sector and council to better understand the operational pressures faced by GPs and providing a forum for us to explore solutions together – on **social isolation and homeless health** in particular.”

Ginny Hyland, Policy and Partnerships Officer
Corporate Policy and Communications, Bexley Council

*“We are moving towards a place where we have several examples of where we are doing things differently, **with better outcomes for residents, and for less money**. Particularly in early help and prevention, dementia and childhood obesity. And because of the conversations that have taken place here, we are clearer about what we want in terms of action, and about doing it together”*

Will Tuckley, Chief Executive Bexley CCG

Birmingham

John Taylor Hospice teams up with Birmingham City Council Public Health and Cross City CCG to lead the Building Health Partnership in the Erdington area of Birmingham. The BHP programme takes place against a backdrop of considerable cross sector joint working, including a recently launched end of life care strategy. The partnership agreed a specific focus on:

- 1: Greater choice for people requiring end of life care and their carers, focusing on growing the market of support (including from the VCSE), and exploring models of funding new ways of doing things, potentially through increased use of personal budgets.
- 2: The families and carers of people needing end of life care and who die are better able to understand and overcome barriers to longer, happier and healthier living.

The group also committed to exploring the potential alignment of health and social care at a district level and a city level, and look at lessons to extend to the wider community.

Achievements so far

The group received expert input from the Director and a Broker from MySupportBroker, who shared their experience of developing a social business engaging people with experience of long term conditions as brokers for others in the community to enable them to use their personal budgets to support their choice and control, and live the best possible life.

This has influenced the development of an innovative model for individuals needing end of life care, involving using personal budgets and growing/ stimulating the menu of support available. The group have written a paper outlining the rationale for developing a project involving support brokerage around end of life care, including evidence of wellbeing and financial benefits. This paper is being presented to colleagues in the local authority to get buy-in and some financial resource to carry out the project/pilot.

Next steps

- Attracting funding and support to implement the pilot project.
- Final session will focus on delivery plan for the pilot with the available resource.

Expected outcomes

Funded innovative approach to End of Life care

Co-designed End of Life care model, using peer broker and personal budget. Increasing the choice, support and quality of care for people requiring end of life care.

Bolton

Bolton CCG, VCSE sector, Council and other key partners are **focussing their efforts on children and young people's mental health support and suicide prevention to ensure timely access and evidence-based pathways, leading to better outcomes**. This includes reduced deliberate self-harm as well as improved general mental health and wellbeing. Through BHP, partners are joining up ALL local provision into a more navigable local offer for young people. An extensive mapping exercise has already taken place (with over 40 participants) that has provided clearer insight into the wide range of support in and around Bolton and will broaden understanding, engagement and cross-sector delivery of the Bolton mental health strategy.

Achievements so far

- 86 individuals have attended one or more BHP events, representing around 50 different organisations including the University of Manchester and Bolton Young People's Forum.
- Papyrus (works to prevent young suicide) have presented to the BHP group and co-produced a training programme for local organisations which is funded by the CCG and supported by Public Health.
- A Transition work group (led by the CCG) has been established to oversee work to improve the transition between Child and Adolescent Mental Health Services and Adult Mental Health Services.
- Young people actively participated in BHP sessions and went on to establish a young people's advisory group. This has been a unique opportunity for young people to be directly involved in the design of CAMHS services.
- Bolton CCG have announced new funding (£400,000) that will underpin their transformation plans for young people's mental health and well-being. And Bolton Council has indicated funding is available to support Mental Health services for vulnerable people.
- Lead commissioners for mental health from the Local Authority presented at the final BHP event on 10th September.
- The Children's Commissioner for England has stated her interest in the Bolton model with a view to connecting priorities and sharing nationally.
- A joint action plan has been consulted on with people/organisations signing up their own contributions/pledges.

Next steps

- The overarching focus for the Bolton BHP work is **to prevent suicide in young people and provide better access to a wider range of children and young people's mental health support services**.
- BHP is currently **mapping assets** with associated costs alongside a gap analysis within current service provision. There has been (and continues to be) consultation with providers, VCSE and users of the service to describe what future models would look like. This analysis is being fed into the **mental health strategy governance** structure.
- Developing Bolton-wide plans for the **Papyrus 'education' strategy**
- Identifying a range of possible **pathways for young people** utilising an **asset based** approach.
- Wider **consultation with young people** on what support should look like from their perspective.

- Inviting organisations to pledge their commitment to the Bolton partnership approach to supporting children and young people.
- BHP are co-creating and developing new models of care which include standardisation of school protocols, referral process into CAMHS, eating disorders, crisis care management and reduction in self-harm.
- The models being described within BHP are to be mapped against the Improving Children and Young People's health outcomes: a system wide response and the Outcomes Framework for national health services, adult social care and public health.
- Momentum is being developed within Bolton to develop new ways of working and to enable change to include the sharing of data across the health and social care economy, developing a supportive workforce (paid & voluntary) around young people and their families/carers and developing mobile/computer applications to enable self-management.

'We have never been approached by Health like this before' Bolton Lads and Girls Club

Anticipated outcomes

An asset based approach to Mental Health services in Bolton:

- Improved awareness of the local 'offer' for children and young people that will provide better access to services, and more resilience in the system.
- More strategically aligned commissioning and opportunities for joint/cross-sector approaches to supporting children and young people in Bolton.
- Developing a 'whole system' approach to mental health through the engagement and involvement of key stakeholders through the process.

Hull

The BHP in Hull provides an opportunity to add momentum to developing the joint CCG/Public Sector/VCSE Thriving Communities plan which sits under a Thriving Communities strategy Hull 2020. The BHP group is **focusing on three areas**:

- **Social value and social capital**
- **Person-centred outcomes for joint commissioning**
- **Exploring new models of commissioning based on existing good practice.**

The Hull BHP focus on commissioning aims to measure, articulate and mainstream what works, and get to the next step in terms of the wider VCSE being involved as true commissioning and delivery partners to develop community capacity.

To date three BHP sessions have been held in Hull, with an excellent attendance from across the different sectors; including the Director of Public Health, Chair of the CCG Board and major VCSE infrastructure, delivery and provider organisations.

Achievements so far

BHP has already provided **significant input into the design of the re-commissioning of the Social Prescribing Project**, making recommendations about how to better involve the VCSE, including exploring an Alliance Contracting model. The working group established through BHP is now devising detail for a co-design approach for the service specification.

Social Value: BHP has brought together the procurement teams at the Council and CCG to share their work so far on social value. They are now focusing on the development of a shared framework, involving other commissioners such as the Police and Crime Commissioner. The proposed framework is in the process of being taken to the Hull 2020 delivery board.

Many of the **participants have developed partnerships and are working on joint initiatives** as a result of being involved with the BHP programme, for example:

- Preston Road Women's Centre is working in partnership with housing landlords to develop a legal services model.
- Cornerhouse (A sexual health charity) is co-producing more with young people and feeding this through the Children, Young people and Families Board.
- Humber Sports Partnership has developed the Young Fit Fans initiative around health and employment support, in partnership with Hull Kingston Rovers.
- Hull and East Yorkshire Hospitals Trust is looking at work experience and volunteering, along with City Health Care Partnership.
- The Warren (a youth support organisation) has moved into social enterprise with a street food initiative

Next steps

- Development of a shared social value framework for Hull – with different organisations or sectors developing a 'menu' of potential social value activities that support the outcomes of the framework.
- Tendering of the co-designed social prescribing contract.

- Final BHP implementation session to take place on 16th September 2015 focusing on Legacy: Hull is committed to an ongoing Building Health Partnerships group, and the final session will focus on how that should evolve and how it fits best with other structures in the City to ensure maximum effectiveness as a bigger voice for the VCSE and the 'go to' place for statutory organizations to work alongside the VCSE.

Expected outcomes

Co-designing for shared outcomes

The upcoming procurement of a Social Prescribing Service will be developed taking a co-design approach and this will then be used as a framework for future procurements.

A mutually agreed social value framework for Hull city

Nottingham

Nottingham BHP **brings together a cross sector Health and Employment group that is working to create a greater awareness of the importance of (mental) health and well-being and reducing duplication of commissioned support services in this area.** The group is driving practical actions and joint decisions through a cross-sector approach. A key aspect of the programme has been to improve engagement of the VCSE sector in the health and employment agenda and to examine how cross-sector partnership working might continue beyond the lifetime of the BHP programme. The group has been working alongside key partners such as the DWP, local/regional LEP, Big Lottery Fund and The Work Foundation. In addition to the three development sessions already held achievements have included:

Achievements so far

- Diagnostic session attended by The Work Foundation to develop their research in which BHP is a featured model.
- An extensive mapping exercise (via a survey) with Nottingham CVS taking the lead as part of their CCG contract agreement. BHP facilitated the workshop support and sharing of outcomes that have now been embedded into the self-care interim directory ahead of the newly commissioned Health & Social Care Directory being commissioned as part of the Care Act requirements.
- An analysis of the survey results demonstrates the range of support on offer, how it's funded and provides guidance on the gaps that need to be addressed. The services also mapped their 'offer' to Wellness in Mind, the Nottingham Mental Health strategy.
- A meeting was held with the LEP to align priorities and consider possibilities for joint working, including the launch of the recent BIG funding – Building Better Opportunities.
- A cross sector event attended by over 50 people was held on the 15th July. Speakers included Nottingham Fit for Work Team, The Work Foundation, Working Well Manchester (Big Life Group) and Opportunity Nottingham. The event was chaired by the Director of Employment & Skills at NCC and was attended also by members of the UK Healthy Cities Network.
- Following a 'Worklessness and Health Inequalities: Research, policy and practice perspectives' event, the NCC Health and Well-Being Manager contacted the Director of PHE who has asked to be kept updated on the work and will share with colleagues.
- BHP 'trip' being organised to Manchester to learn more about Working Well Manchester and Greater Manchester Mental Health and Employment Trailblazer.

Next steps

- Build on connections made with the VCSE around Health & Employment services and support in the city and continue to develop relationships with the Lottery, LEP (D2N2) and BitC.
- Potential being explored for BHP outcomes to feed into the Royal Council of Psychiatrists national commissioning guidance.
- It was agreed that the VCSE sector should be supported to have higher level and broader engagement in the health and employment agenda overall and that the BHP framework will be sustained beyond the lifetime of the programme. Some key milestones identified for the dissemination of this activity are:
 - The Health & Well-Being Board meeting in July with a specific employment focus.

- European Social Fund Building Better Opportunities – Summer 2015 (action plan to inform).
- Re-design of CCG Mental Health Pathway – April 2016 (BHP work to influence and support).

“I found it really interesting and enjoyable and am keen that we consider what ‘quick wins’ are possible at this stage both in terms of the services we have over the next financial year (2015/16) and then in terms of what we need to consider when looking at our MH & Wellbeing Pathway of services from 1st April 2016 and beyond.”

Katherine Biddulph,
Commissioning Manager in Mental Health, Nottingham City CCG

Anticipated outcomes

- BHP work will influence the development of a health and employment pathway that will be shared with clinicians, citizens and cross-sector partners.
- An analysis of the VCSE health and work support services that are available across the city, to be included in the new web-based service directory being jointly commissioned by the CCG and the Local Authority under the requirements of the Care Act.
- A partnership/asset based approach to working across Health and Employment with clearer potential for a joint commissioning model to address local priorities.

South Gloucestershire

South Gloucestershire partners Age UK, CCG, Sirona, Public Health and the local authority have been working to build a robust partnership as part of their integrated working initiatives and Better Care Fund plans. Through the BHP programme they **aim to extend the reach, engagement and commitment to their Integrated Care in Practices test and learn project (currently working with three GP practices) via a cross sector partnership approach to meet the needs of local people.** This will bring an improved understanding to cluster working across sectors, resulting in a partnership strategy to be sustained beyond the programme.

Achievements so far

- Diagnostic session opened and attended by the Director of Public Health.
- Sirona and Public Health agreed to start to map services, support and social opportunities for over 50s with (focus on LTCs) across South Gloucestershire, by cluster.
- Sirona and Southern Brooks (charity) shared cluster working initiatives.
- Sirona, CCG, Local Authority and Age UK partnership is developing joint working wider than BHP and extending the approach.
- Good GP attendance at all events including Dr Jon Evans who opened session two (Chair of South Gloucestershire Better Care Fund).
- Community pharmacy attended BHP session two, with a particular interest in integrated approaches to care.
- Big Lottery Fund attended BHP session three and will also attend session four to further align priorities and share opportunities to continue the work.
- User event (22/06) supported by Healthwatch (engagement and coproduction).
- Analysis undertaken of all integrated initiatives locally for commissioners (to enable more integrated commissioning approaches).
- Dudley presented their Multi-Speciality Provider system at session three on 14th July and a future site visit is being organised.
- BHP "Working Together in Care and Health" stall at the September VCSE Network conference.
- Development of a BHP blog <http://socialenterprise.org.uk/news/building-health-partnerships-south-gloucestershire>
- Invited a speaker from the National Co-production Advisory Group, part of the Think Local Act Personal Partnership at the Social Care Institute for Excellence, to session four.

Next Steps

- County-wide approach to integration/cluster working led by Age UK & Sirona.
- Ensuring the Building Health Partnerships work is visible across South Gloucestershire and the national network.
- Looking further with the senior commissioners into the Dudley approach to identify any best practice and lessons learnt for South Gloucestershire.
- Increase Service User co-production activities and engagement with the voluntary sector.
- Continue to support the dialogue on integrated commissioning.

"I have learnt more about cluster working today than from being on the Better Care Fund and Health and Well-Being Board."

Mark Pietroni, Director of Public Health - South Gloucestershire

Anticipated outcomes

- A strategic alliance of integration initiatives across the county, with links made between partners to align priorities via a shared action plan.
- Development of a robust case for Age UK's Integrated Care in Practices and BCF's Cluster Integration work.
- Development of the service user voice in the co-production of local service delivery.
- Putting in place the foundations of whole-system culture transformation that will enable a shift towards a more integrated, consistent and holistic system for health and care.