Appendix B

in good health

Norfolk and Waveney Sustainability and Transformation Plan Update for governing bodies and trust boards – January 2019

Purpose of report

The purpose of this paper is to update members of the Governing Body / Trust Board on the Norfolk and Waveney Sustainability and Transformation Partnership (STP), with a focus on progress made since the last report in November 2018.

Report summary

This report provides information on key developments within the Norfolk and Waveney health and care system and projects that the STP is currently working on. It focuses on the work we are doing to develop a long-term strategy for mental health, improve mental health services for children and young people, and develop an integrated care system for Norfolk and Waveney.

Action

The Governing Body / Trust Board is asked to:

- Consider and comment on the report
- Identify actions that the Governing Body / Trust Board could take to accelerate progress on delivering the changes necessary to transform care and deliver sustainable services

Main body of report

Creating an Integrated Care System (ICS) for Norfolk and Waveney

1. On 7 January 2019, the NHS published its Long Term Plan, which lists a number of important ambitions for the next few years. Central to the delivery of all of them will be the need for people to work together – whether that's GP surgeries teaming up with each other, as well as community and mental health services, so they can provide more appointments and services, or whole health and care systems coming together to plan and deliver improvements for patients. The Long Term Plan says that by April 2021 integrated care systems (ICS) will cover the whole country, growing out of the current network of Sustainability and Transformation Partnerships (STPs).

2. Over the past few months a significant amount of work has been done to develop our ICS through our involvement in the Aspirant ICS Programme and engagement with a broader group of colleagues, including CCG governing bodies and provider boards, as well as local voluntary and community sector organisations and patients.

3. Our ICS will operate at three levels: at "neighbourhood" level, place level and across Norfolk and Waveney. We have been considering what we could do differently at these three levels to better integrate services and provide more joined-up care:

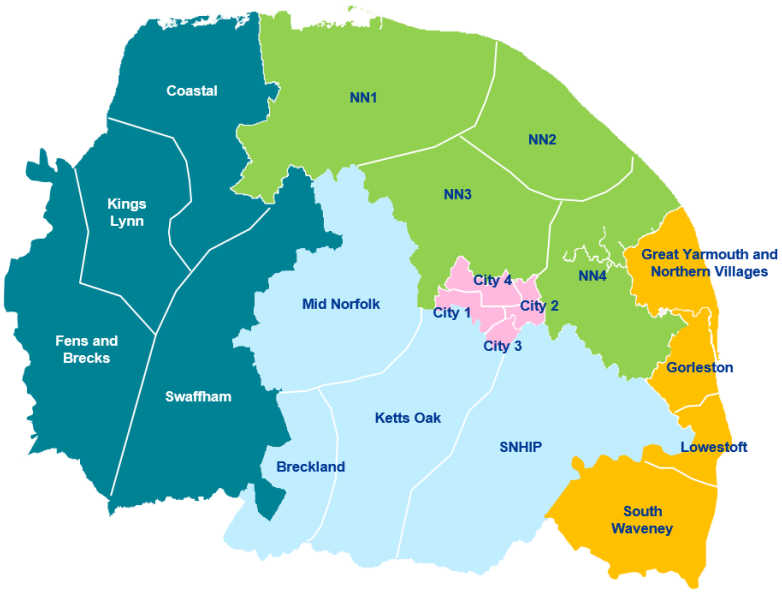
At "neighbourhood" level

4. We will create 20 "neighbourhoods" – four in each CCG area, serving a population of between 25,000 and 70,000 people. At this neighbourhood level we have some really exciting ideas about how we can transform care, based on what the most effective GP practices are already doing.

5. In each neighbourhood we want to create primary care networks – teams based around groups of GP practices and made up of professionals from a range of different backgrounds, for example there would be an adult social care lead and team, mental health workers and community healthcare colleagues.

6. These multi-disciplinary teams will work closely with local voluntary and community groups and other statutory services; social prescribing will be a key tool for helping tackle the underlying causes of ill-health. We've just been awarded £535,000 from NHS England to develop our primary care networks. This video explains more about primary care networks and the benefits they'll bring to people living in Norfolk and Waveney.

7. Here is a map showing the 20 primary care networks we are developing:



At place level

8. We have five CCG areas which are very different from each other in many ways. For example Norwich is urban and has a much younger population than rural North Norfolk, and so there are some instances when we need to adapt services to meet the needs of each area. We are creating local delivery groups in each of the five places, involving the district council(s) and other key partners including the voluntary and community sector.

Across Norfolk and Waveney

9. There are times when it makes sense for us to make decisions and provide services for the whole area or 'system', particularly to remove the unwarranted variations in quality and care that still exist. We need to be clear about when this is the case and equally to understand when we'd be better to make a decision at a more local level.

10. We have started to draft a vision and strategy for our system, together with a financial strategy, contracting arrangements, an approach to population health management and a plan for how we can strengthen our primary care networks.

11. An important milestone for the STP will be an invitation from NHS England to formally submit an application to become an ICS. We expect NHS England to notify us of the application process for becoming an ICS by the end of January. governing bodies and boards will be notified of this process as soon as possible. In due course governing bodies and boards will be invited to discuss the expression of interest within the timescales set by NHS England.

Draft Mental health strategy for Norfolk and Waveney published

12. On 10 December 2018, we published the draft Mental Health Strategy for Norfolk and Waveney, which is available to read here: https://www.healthwatchnorfolk.co.uk/ingoodhealth/stp-mental-health. Our draft strategy has been developed with input from thousands of local people and professionals. Based on what we have heard so far, our vision is to develop and deliver 'place based' services wrapped around primary care through integrating mental and physical health in each of our localities: Great Yarmouth and Waveney, North Norfolk, Norwich, South Norfolk and West Norfolk.

13. Six pillars have been identified for future work and we are co-designing the detailed plans that sit behind each of these. The pillars are worth highlighting as these come straight from what we have heard about where current services need to be improved:

    - Focus more on prevention and wellbeing

- Ensure clear routes into and through services and make these transparent to all
- Support the management of mental health issues in primary care settings
- Provide appropriate support to those in crisis
- Ensure effective in-patient care for those that really need it
- Ensure the system is focused on working in an integrated way to care for patient

14. We are now asking people what they think of our draft strategy, to help us refine it into the final document. People can tell us what they think of it by:

    - Completing our online survey: https://www.smartsurvey.co.uk/s/NWMHStrategyDraftFeedback/. A printed version is also available on request.
    - Writing to us: Freepost RTJE-GXBZ-CSJR, NHS Norwich CCG, Room 202, City Hall, St Peters Street, Norwich, NR2 1NH.
    - Inviting us to a meeting of their local group or organisations between now and 6 February. We will do our best to have someone attend to discuss the strategy.

15. As a partnership we are committed to working together to respond to NSFT's recent CQC report and to make the improvements to mental health care that we need to. We are working closely with our national NHS colleagues, our counterparts in Suffolk and NSFT itself to ensure that the necessary short-term changes take place quickly and effectively while we're developing a new model of care, based on prevention, primary care and community.

Review of child and adolescent mental health services

16. We have also reviewed child and adolescent mental health services (CAMHS). Our aim is create a much more integrated children's system, with consistent system-wide strategic leadership for children and young people's mental health.

17. As with our review of adult mental health services, this work has been driven by engagement with young people, their parents / carers, professionals and others. The review has looked at a range of aspects of our Local Transformation Plan and our wider ambitions for these important services. This has included commissioning arrangements, leadership and governance, service models, performance, the provider landscape, and the many interfaces these services need to have with other parts of the system.

Focusing on children and young people

18. In addition to reviewing child and adolescent mental health services, we have also given some thought to the wider integration of children's services. We have decided to create a sixth STP strategic workstream for children and young people. This will enable us to collectively make the biggest difference to the lives of children and young people living locally, and will support, for example, the implementation of the recommendations from the review of CAMHS.

Key Risks and Challenges

19. The key risks and challenges for system partners are:

- Achieving the scale and pace of change within the available resources
- Implementing the changes to ensure a sustainable workforce
- Developing our digital maturity across Norfolk and Waveney as a key enabler to change.

Officer Contact

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