

## Report to STP Board: 19 September 2019

<b>Agenda item:</b>	5.		
<b>Title:</b>	North Alliance - Update		
<b>Lead:</b>	Neil Modha, GP, Co-chair North Alliance and Caroline Walker, Co-chair North Alliance.		
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<b>Report purpose (Please mark one in bold)</b>			
APPROVAL	DECISION	ASSURE	<b>INFORM</b>
<b>Link to STP Priorities (Please mark all applicable in bold)</b>			
AT HOME IS BEST	SAFE & EFFECTIVE HOSPITAL CARE, WHEN NEEDED	WE'RE ONLY SUSTAINABLE TOGETHER	<b>SUPPORTED DELIVERY</b>
<b>Committees/groups where this has been presented to before (including date)</b>			
Paper circulated and approved by Caroline Walker and Neil Modha.			

<b>Purpose of the paper</b>
This paper updates the Sustainability and Transformation Partnership (STP) Board on the progress to date, successes of the North Alliance and outlines the next steps.
<b>HCE are invited to:</b>
The STP Board is asked to <b>note</b> the contents of this report and progress being made by the North Alliance.

## 1. INTRODUCTION / BACKGROUND

The North Alliance is making progress and gaining momentum, with increasing clarity on its vision and purpose over the next five years. Implementing the Integrated Neighbourhoods programme remains the largest priority and this report outlines the progress over the summer and the Alliances next steps.

## 2. BODY OF REPORT

### *North Alliance Strategy*

The outputs of the June Away Day have been used to facilitate discussion at subsequent North Alliance meetings and the group have agreed the vision, purpose, objectives and five year road map for the North Alliance. This has been used to inform the North Alliance response to the Long Term Plan which the group are on track to deliver for the September/November national submission.

The agreed **vision** for the North Alliance is to improve the health and wellbeing for people living within Greater Peterborough, Huntingdonshire and Fenland (population of 543,000 based on the North West Anglia Foundation Trust (NWA AngliaFT) footprint). It will achieve this through a partnership and collaborative approach that focuses on prevention, proactive and holistic care and population health at a local level of 30-50k. **In five years time** it aims to be formally accountable for the wellbeing and delivery of care for our population and deliver the quadruple aims of health and care provision (quality, finances, patient experience and the wellbeing of our staff).

The agreed **purpose** of the North Alliance is to:

- Provide strategic direction and lead transformational change with a placed based approach;
- Improve the quality, outcomes, finances and patient experience within our system;
- Establish and oversee Alliance Operational Groups, that will implement the improvements initiatives;
- Monitor and manage system progress and risks within defined improvement initiatives and areas of focus; and
- As and when required and as appropriate, manage resources and budgets with a placed based approach.

**In five years time** the group will be a binding legal vehicle to take decisions collectively in the populations best interest.

The agreed **objectives** of the North Alliance are to:

- Implement Integrated Neighbourhoods to complement the 12 Primary Care Networks;
- Implement a comprehensive long term solution for the local out-of-hospital system;
- Implement the optimal long term solution and capacity to reduce urgent and emergency demand;
- Implement a long term system solution to reduce planned care demand; and
- Work collaboratively to improve the system workforce and financial challenges.

**In five years time** it will reduce health inequalities, prevent ill health and predict/respond to people at risk of deterioration.

### *Integrated Neighbourhoods*

The North Alliance has created a virtual team of staff from partner organisations to help drive the place based programme forwards (Primary Care Networks, Integrated Neighbourhoods, Think Communities). The team includes members of the CCG Primary Care Team, Integrated Neighbourhood Managers, Change Agents, Think Communities Managers and the programme team provided by the System Delivery Unit (SDU) and Greater Peterborough Network (GPN). The team meet weekly at the Allia Business Centre to drive the programme forwards, unblock issues and ensure collaboration and a consistent approach to the different strands of the programme.

### ***Greater Peterborough***

The Greater Peterborough Federation completed an expression of interest process with the Primary Care Networks (PCN). Three of the five PCNs expressed interest and submitted compelling cases for creating their Integrated Neighbourhood this year. The North Alliance agreed to support the three sites, BMC Paston, Peterborough South and Central and Thistlemore with BMC Paston and Peterborough South receiving an Integrated Neighbourhood Manager from August to develop and implement their model.

The North Alliance team are now supporting the PCN Clinical Directors to develop their approach and plans. This will include holding a series of three 2-hour workshops to allow staff working within the Integrate Neighbourhood to meet one another, review their population health data and decide on local priorities. These workshops will kick start the Integrated Neighbourhood programme for the PCN and they are being scheduled for September through to December.

### ***Hunts and Fenland***

The North Alliance supported an engagement event in Wisbech on 9 July to launch the Integrated Neighbourhood Programme. The event was exceptionally successful with 50 attendees who worked within the Wisbech area and represented all organisations.

There was particularly strong representation from the voluntary sector and several patient representatives were in attendance. The group welcomed the opportunity to meet one another, hear about the vision for the Integrated Neighbourhoods and review their population health data and needs. One attendee fed back "its great to finally see data that demonstrates what we see on the ground, we've never had this local data before". Using the data, local knowledge and the 'I love Wisbech' community survey the group were able to identify the following priorities:

- Smoking;
- Engaging with the public;
- Community Led Action; and
- Directory of Services.

A follow up event has been arranged for 16 September which will allow the group to spend more time developing the projects and next steps.

### ***Innovation Fund***

There are several sources of funding to support the Integrated Neighbourhood programme of work and development of the Primary Care Networks. The North Alliance aims to coordinate funding and bids to optimise the support opportunities for the PCNs/Ins.

The North Alliance have agreed to invest £150,000 of their £300,000 funding (obtained from the SDU underspend) to create an innovation fund for the Integrated Neighbourhoods. A process and criteria have been agreed which mirrors the decision in the South Alliance. All Primary Care Network Clinical Directors will be informed of the fund and supported in applying to the Alliance. The Local Authority have a similar investment scheme and there is commitment to where ever possible work together and potentially match fund investment if it shows benefit to health and Council.

### ***IV Antibiotic Service***

Members of the North Alliance remain committed to resolving the gap in service provision for home IV antibiotics for people living within the geography of the North Alliance. Patients currently remain in hospital to receive IV antibiotics, whereas in the South of the county a service is commissioned to provide IV antibiotic at home.

The North Alliance have been working together to create an options papers for the provision of this service in the North including detailing the current demand, options for service provision and costs. The

paper has been presented and approved by the Alliance with the proposal of extend the OPAT service and piloting a clinic at Doddington. The Clinical Commissioning Group (CCG) is now tasked with progressing this into implementation and combining the commissioning arrangements into their community contract review process. The CCG will return to the North Alliance next month with a clear outline of the plan and timeline.

## ***Urgent Care***

The North Alliance have expressed a desire to be more involved in the design and oversight of the urgent care work programme. They have welcomed attendance from the Urgent Care Clinical Lead at recent meetings and have requested for the SRO to attend. The North Alliance will be working together over the coming month to support an appropriate approach for the oversight, resourcing and assurance process for the various streams within Urgent Care. This will naturally include strong involvement from all partners, particularly the CCG.

## ***Planned Care***

The North Alliance welcomed the update from the planned care team at the August meeting. The North Alliance committed to supporting the planned care programme of work and would like more involvement moving forwards. The North Alliance asked the planned care team to ensure we focus on local data around the Primary Care Network footprint and have targeted approaches to reducing elective demand. The Planned Care team will return to the Alliance in October with the outcome of their Planned Care Workshop and some more detailed data on local issues in relation to elective care.

## **3. RECOMMENDATIONS**

The STP Board is asked to **note** the contents of this report and progress being made by the North Alliance.

**September 2019**