

**Health & Wellbeing Board  
Walsall Together Update  
9 September 2019**

## **1. INTRODUCTION**

This report provides an update on the development of Walsall Together. It provides an overview of the work undertaken to date and highlights some key priorities for the partnership over the coming months.

## **2. BACKGROUND**

Walsall Together is an Integrated Care Partnership (ICP) between Walsall Healthcare NHS Trust, Dudley & Walsall Mental Health NHS Trust, Walsall Council (Social Care and Public Health), Walsall Clinical Commissioning Group (CCG), One Walsall (Council for Voluntary Services), Primary Care Networks, and Walsall Housing Group (representing the housing partners). The partnership aims to develop new integrated ways of working to:

- Improve the health and wellbeing outcomes of their population;
- Increase the quality of care provided; and
- Provide long term financial sustainability for the system.

## **3. GOVERNANCE ARRANGEMENTS**

### **3.1. Walsall Together Partnership Board**

The Walsall Together Partnership (WTP) Board was established in May 19 and continues to meet on a monthly basis with representation from all partners. Terms of Reference have been agreed. In August 19, Walsall Housing Group (WHG) was approved as a member to act as representatives of the wider housing sector.

### **3.2. Primary Care Networks**

Primary Care Networks (PCNs) are a key part of the NHS Long Term Plan. They bring practices together to work at scale alongside community, mental health, social care, pharmacy, hospital and voluntary services in their local areas. PCNs will enable greater provision of proactive, personalised, coordinated and more integrated health and social care with clear benefits for patients and clinicians. PCNs will also be expected to support the integration of primary care with community and other services through the lead clinical directors taking a seat on emerging Integrated Care Systems.

In Walsall, the 7 PCNs were confirmed in June 19. They are largely aligned to existing Locality Teams and membership of the PCN Clinical Directors is built into the governance structure at all levels of the Walsall Together Partnership. The PCNs as a new form have been invited to the WTP Board and all other levels of the governance model. The CCG has further supported this commitment with additional funding to undertake this role.

### **3.3. Alliance Agreement**

The Alliance Agreement formalises the governance arrangements within the partnership without requiring any contractual amendments. It describes the way partners will work together to deliver sustainable, effective and efficient services. The Alliance Agreement has been approved by the WTP Board and is being presented to each partner organisation's Board or Governing Body during September and October 19.

### **3.4. Senior Management Team and Programme Office**

A Senior Management Team (SMT) and Walsall Together Programme Office have been established and are co-located at Blakenall Village Centre. The SMT is meeting regularly with a strong focus on operational delivery of the services in scope.

A robust transformation methodology and programme structure have been developed that describes the remit, programme governance and desired outcomes of the individuals and teams tasked with delivering the Clinical Operating Model (COM).

### **3.5. Clinical Operating Model Group**

A COM Group has been established as the overarching clinical and professional group that will mandate, oversee and ensure effective engagement for the system to enable better integrated working in the interests of citizens. The COM Group met for the first time in July 19 and was well attended by partners from across the system. Monthly meetings have been established from September onwards.

### **3.6. Section 75**

A working group has been established to develop the proposed Section 75 agreement between Walsall Healthcare NHS Trust and Walsall Council. A high-level Implementation Plan has been agreed and there is a series of meetings in the diary over the coming months. An outline briefing document will be shared with WHT board members during September to help shape further thinking.

## **4. DELIVERY OF THE TRANSFORMATION**

### **4.1. Integration**

Work to fully integrate and co-locate health and social care teams in the community is ongoing. Currently, health and social care teams are fully co-located in the West and East localities and they are partially co-located in the North. However, the social care teams for the South locality remain at the Civic Centre owing to the lack of space available in the current locations.

A Walsall Together Space Utilisation Group has been established and is looking at the entire partnership estates portfolio. Most recently, full co-location of the East locality teams has been achieved at Blakenall Village Centre. The teams previously occupying space at Parkview Medical Centre, Anchor Meadow Medical Centre and the Civic Centre comprise of community health services and adult social care and will be fully integrated alongside the operational management team for the services in scope. The next priority for the Space Utilisation Group is to confirm a plan to co-locate the South Locality teams; a number of options have already been identified and the Group expects to achieve co-location by the end of October 19.

## **4.2. Workforce and Organisational Development**

Beyond physical co-location of teams, the Walsall Together partners recognise the importance of undertaking workforce development to achieve full integration. In July 19, the WTP Board confirmed the adoption of strengths-based practice as a standout feature of Walsall Together. Funding to the value of £43,400 has since been secured, which will allow us to deliver full training for strength-based approaches, co-production with service users and personalisation to around 350 members of staff across locality teams between September and March 2019/20.

Wider workforce development is being led through the Walsall Together programme team. A Programme Manager has been assigned responsibility to lead this work to include scoping of opportunities for training and development of existing staff and future workforce roles that deliver the clinical operating model.

In the context of delivering an ambitious programme of transformation across the health and care system, the WTP Board has resolved to undertake a series of developmental workshops between September and November 19 with key themes pertinent to delivery of an ICP. The development will include systems thinking and specific themes for Walsall Together e.g. strengths-based practice and co-production. A more detailed proposal for this development will be considered by the WTP Board in September.

## **4.3. Delivery of the Clinical Operating Model**

The Walsall Together Partnership has made good progress in delivering service transformation across the target Clinical Operating Model:

- Integration of specialist nursing services for Respiratory and Cardiology has been delivered within the locality teams;
- Agreement on a combined infrastructure to support a Shared Care Record and Population Health Management has been reached;
- Conversations are underway to explore how a data warehouse could be hosted by one partner on behalf of the partnership.
- As a starting point for the implementation of a Single Point of Access (SPA), a pilot has been developed for Winter 2019/20, with a specific remit of admissions avoidance;
- A new Standard Operating Procedure has been implemented at WHT to better support patients who are medically stable for discharge by improving mobilisation and reducing deconditioning;

- Improvement Plans for the Integrated Care Service and wider therapy services have been agreed and project groups have been established to assure implementation.

## 5. PROGRAMME RISKS

A risk framework for Walsall Together is in development and is due to be presented to the WTP Board in October 19. This will be aligned the WHT Risk Management Policy as host provider. The following key risks and associated mitigations have been identified.

Risk	Mitigation	RAG
Estates – ability to fund and identify suitable premises to achieve the target operating model including co-location and integration of services and the full business case offering (4 Health & Wellbeing Centres across Walsall)	WT has Created a Space Utilisation Group, which links to the STP Local Estates Forum Development of a blueprint H&WB Centre through the One Public Estate collaboration Actions do not fully mitigate the risk at present	
Engagement - ability to deliver and embed the full programme of transformation will require effective engagement across all partners including PCNs	A Communications Group has been established and is developing a communications strategy for WT Funding is agreed for a dedicated Communications Lead, which will be advertised in September Funding for PCN engagement has been agreed by the CCG and the WT Director has undertaken a series of engagement meetings with PCN Clinical Directors	
Financial model – funding for pump priming and ability to invest in preventative services	CCG and Council commissioners are represented at the WTP Board, SMT and COM Group to ensure commissioning decisions and specifications are aligned to WT priorities and appropriate challenge is applied regarding potential disinvestment Sources of additional developmental and transformational funding are being identified and applications submitted where appropriate e.g. Family Safeguarding, Skills for Care, and industry partners	
Resource capacity to deliver the transformation (programme office and operational support for implementation)	Discussions are ongoing with the SMT and WTP Board regarding the priorities for WT, particularly in Tier 1 (Integrated Primary Care, LTC Management, Social and Community Services) Further recruitment to the programme office is in progress (administration and project management support)	

<p>Organisational Culture - ability to achieve fully integrated working across all partners</p>	<p>Organisational development plan agreed at 3 levels of management to develop a culture of systems thinking, integrated working, strengths-based practice and co-production:</p> <ul style="list-style-type: none"> <li>• Board</li> <li>• SMT</li> <li>• Operational teams</li> </ul>	
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## 6. KEY PRIORITIES

Priorities for estates and workforce development have already been identified in the respective sections above. Additional priorities for Walsall Together have also been identified for the upcoming months and are documented below.

A number of priority pathways have been identified and are informed by the Joint Strategic Needs Assessment, relevance to the Walsall Together Outcomes Framework, synergy with the Business Case deliverables and identified improvement opportunities. The priority pathways are:

- Diabetes;
- Cardiology;
- Respiratory;
- Mental Health Outpatients;
- End of Life;
- Health Child Programme.

These pathways will be the focus of the COM Group and work is underway to understand how this will feed into the main transformation agenda.

In respect of the main transformation agenda, there is significant focus on defining the scope of the various tiers within the Clinical Operating Model and most notably for the Single Point of Access and Resilient Communities. A series of workshops are currently in progress, involving a wide range of stakeholders to reflect on work already being undertaken, to align partner plans (e.g. Walsall PROUD, NHS Right Care) and to define the vision for what these services could look like for Walsall.

There are also plans for redesign of urgent care services by enhancing integration between Rapid Response and Place Based Care. Included in this work is a review of the Community Matrons role, ensuring admissions avoidance for the frailest elderly population.

Planning for Horizon 2 (2020/21) is underway, which will see Children's and Public Health Services come online. A key part of this work is the aforementioned Section 75 Agreement as this will support some important decisions regarding the scope of services to be included within the Section 75 and the wider partnership.

A paper was presented to the WTP Board in July that outlined Walsall's application for implementation of the Strengthening Families, Protecting Children Programme. We have since passed through to the next stage of assessment and have submitted a statement of readiness, which details our suitability and commitment to the Family Safeguarding Model. Walsall Together Partners fully support the application for the

Family Safeguarding Model and have agreed to proceed with implementation notwithstanding that we are still waiting to hear the outcome of our application. Further details in respect of a mobilisation plan and the implications for the Walsall Together programme are being worked through.

Healthwatch has been commissioned to develop a Walsall Together User Group ensuring public and patients contribute to the identified priorities for service redesign. Strong public and patient engagement includes co-design and co-production. To lead this work, Healthwatch has appointed a Senior Engagement Lead who is working with the SMT to develop a robust engagement strategy for the partnership. Specifically, the strategy will:

- Describe the person specification and recruitment plans for the User Group, including the approach for vulnerable and seldom heard populations;
- Identify appropriate engagement approaches for different stages of service redesign;
- Define co-design and co-production in the context of Walsall Together.

## **7. Recommendation**

The Board is asked to note the contents of this report.