

## **REPORT TO THE HEALTH & WELLBEING BOARD**

**DATE OF MEETING: 14<sup>TH</sup> FEBRUARY 2024**

**SUBJECT OF REPORT:** Weston Worle and Villages and Woodspring Localities updates

**TOWN OR PARISH: N/A**

**PRESENTING:**

**MATT LENNY, DIRECTOR OF PUBLIC HEALTH (ON BEHALF OF NS HEADS OF LOCALITY PARTNERSHIPS).**

**KEY DECISION: NONE**

## **RECOMMENDATION**

**MEMBERS OF THE PANEL ARE ASKED TO:**

- a) Consider and comment
- b) Give suggestions and observations about any areas not covered within the report

## **1. SUMMARY OF REPORT**

This report outlines the headline plans and the work that the ICB localities in Weston Worle and Villages and Woodspring participate in and how this work is being conducted with our partners to ensure alignment across North Somerset whilst also identifying the needs of the population within each locality working closely with lived experience representatives.

## **2. POLICY**

The key purpose of ICSs is to bring partner organisations together to:

- improve outcomes in population health and healthcare.
- tackle inequalities in outcomes, experience, and access
- enhance productivity and value for money.
- help the NHS support broader social and economic development.

Collaborating as ICSs will help health and care organisations tackle complex challenges, including:

- improving the health of children and young people
- supporting people to stay well and independent.
- acting sooner to help those with preventable conditions.
- supporting those with long-term conditions or mental health issues
- caring for those with multiple needs as populations age
- getting the best from collective resources so people get care as quickly as possible.

All activities and plans developed will both fit into the above objectives but also will align with the HAWB strategy along with conversations that are being undertaken with the physical health strategy.

This is entwined in the frameworks that we jointly have started to work on, across Ageing Well and Community Mental Health.

### **3. DETAILS**

Both Locality Partnerships continue to deliver their respective work plans, based on agreed priorities included in the July report.

Highlights from the last 3 months include:

#### **North Somerset**

Both Locality Partnerships continue to work closely with North Somerset Council colleagues to establish a structured approach for collaboration between North Somerset's **Health & Wellbeing Board (H&WB)** and Locality Partnerships. Following approval of this approach at the November H&WB Board, work is underway to establish the HWB Operational Group, with the inaugural meeting expected to take place before April this year.

Work to develop an **evaluation framework** to enhance the role of evidence in informing partnership decision-making has convened partners and enabled us to agree and prioritise the inputs, activities, outputs, mechanisms of change and outcomes. The logic models which represent the **theory of change** are supporting the production of an evaluation framework. This work will allow the Local Partnerships and system to evaluate and mutually recognise the impact of their integrated work and is already being used in the design and development of new projects - ensuring that initiatives such as Power2Pill and proposed Complex Care Teams reflect the partnership's case for change and strategic objectives.

See [Co-developing a theory of change to evaluate integrated working in two Locality Partnerships – Primary Care Research & Teaching Blog (bristol.ac.uk)](<https://capcbristol.blogs.bristol.ac.uk/2023/12/05/co-developing-a-theory-of-change-to-evaluate-integrated-working-in-two-locality-partnerships/>).

Both Locality Partnerships are taking part in a **Cardiovascular Disease prevention project**, which will have a focus on reducing the disparity and inequality in blood pressure screening uptake and hypertension case finding and management. The project is funded by NHS England following a successful Expression of Interest submitted by the Inner City & East Locality Partnership on behalf of all BNSSG Localities, with Accure Health Consultancy Ltd the contracted provider. Project objectives are to introduce blood pressure screening points closer to where people live, work, shop and visit regularly; empower community health champions from trusted groups to promote blood pressure screening,

hypertension case finding, appropriate referral and self-management; and make blood pressure and hypertension related information available and more accessible to populations and in residential areas where there are health inequalities. Rollout will be phased across the six BNSSG Localities, with Weston, Worle & Villages likely to be in February/March, and Woodspring following a little later in the Spring.

A North Somerset Community of Practice for **End of Life** pathway improvement and advance care planning has been convened. The aim of this group is to share information and learning, provide peer support, build shared understandings and ways of working, and problem solve on shared issues.

### **Woodspring**

Soft launch and roll out of the **Woodspring Mental Health & Wellbeing Integrated Team (MINT)** continues. Two stakeholder welcome days were held in December and January, and a 'culture change' workshop is scheduled in February. The team started taking a small number of referrals from the AWP Primary Care Liaison Service (PCLS) late January and will continue to ramp up as staff come on board.

Work has progressed well on development of a **business case for a community based Complex Care Team** to provide focussed support for a cohort of circa 400k older residents living with complex, long-term conditions. The business case will be submitted to Woodspring Locality Partnership Board in March for approval, whilst clarity on the System decision making process continues to be sought.

Work progresses to articulate and address the **health inequalities** within Woodspring, with a priority focus on Pill (where one of its three LSOAs falls in the 20% most deprived areas of NS). In November, Locality Partnerships secured in-year health inequalities funding which Woodspring Locality Partnership Board elected to invest in the existing Power to Pill infrastructure. £19k was allocated for part-time Pill based Community Development Worker at three days a week for nine months, with an additional £2k allocated for costs that provide or enable interventions (e.g. dehumidifiers for damp housing). The insights from this role will help the Board understand the needs of the community better and will inform future service provision.

Three years recurrent Health Inequalities funding is expected to be devolved to Localities from 2024/25. Over the next couple of months, Woodspring Locality Partnership will agree how to invest year one allocation (c.£83k), informed by concurrent data and insights work.

Portishead Wellbeing Partnership continue to deliver **free wellbeing workshops** for residents of Portishead. Since November, workshops on the topics of developing a health relationship with food; living with chronic pain and diabetes management have taken place. As part of the NS Mental Health Strategy, funding has been allocated to each Locality to deliver parent / carer workshops to help manage anxiety in children and young people. The planning for these workshops will take place over the next couple of months.

More detailed scoping of the Woodspring **Starting Well** Programme is underway, with Dr Tanya Beer appointed as Clinical Lead. Priorities include anxiety in children and young people; self-harm; Adverse Childhood Experiences (ACEs) and asthma.

## **Weston, Worle & Villages**

In line with Starting Well priorities, the One Weston Locality Partnership Board have agreed a focus on early years for its allocation of **health inequalities** funding for Q4 23/24. Following an initial scoping exercise, engagement opportunities with local families will be identified and consideration given to the range of current interventions offered in the early years, and how this offer could be scaled up in key areas that matter to these families. The funding will then be used to provide additional dedicated time and resources as part of these interventions to reduce barriers to accessing support, or in consideration of this cohort's preferences for when and how support is provided. Evidence and insight from the initial scoping exercise will then be used during Q4 to help inform investment of the 24/25 allocation.

Pier Health Group are one of six Primary Care Networks in the South-West to host a **Digital Neighbourhood Vanguard**. This is a multi-year NHS England programme which will bring new digital tools to use in primary care, with a mission statement to 'transform the experience of the citizens we serve and the workforce we support by empowering integrated neighbourhood teams with the digital technology and data capabilities required to enable proactive care and unplanned healthcare events. The programme is currently in the discovery phase, exploring what working across team and organisational boundaries is like now, what digital tools and data are already used, and how useful these are.

The draft Outline Business Case for an **Integrated Community Frailty Hub** was agreed by the One Weston Locality Partnership Board in December. Work continues to develop the Case, pending confirmation of System decision making processes.

## **4. PAN-LOCALITY PARTNERSHIP WORKING**

The 6 BNSSG Locality Partnership Chairs and Heads of Locality have formally established the Locality Partnership Collaborative. The group meets monthly to discuss collaboration in areas of commonality and consider how we make it easier for the ICS and System partners to interact with us as a collective.

A Terms of Reference has been agreed and shared with the Communities Health & Care Improvement Group (HCIG).

## **5. BNSSG ICB CONSULTATION**

The ICB continues its organisational change process driven by the NHS England mandate that all ICBs need to deliver a further 30% saving on running costs. All ICB staff, including Locality Partnership staff employed by the ICB, are included within this consultation.

Around 30 voluntary redundancy applications were approved by the ICB and await final NHSE sign off. The consultation came to an end 24<sup>th</sup> January 2024 and the outcome will be communicated to staff at the end February 2024. Mobilisation of the new structures will take place between March and May 2024. Costs (ideally) need to be removed from the ICB running costs by 1<sup>st</sup> April 2024.

In terms of ICB employed Locality Partnership staff, the structure included within the consultation proposed the following changes (noting that this is subject to change, post-consultation):

- Senior Manager role at Local Authority level
  - 6 x B8c Heads of Localities to be replaced by 3 x B8d Locality Directors
- B7 Locality Development Managers to remain at Locality level (x 6)
- B6 Senior Programme Officer role to reduce from Locality (x6) to Local Authority level (x3)
- B4 Locality Administrator role to reduce from Locality (x6) to Local Authority level (x3)

There is an expectation that scoping a new model for the management of localities will take place with System partners during the coming months and that any changes to delivery models will happen during 2024/25. There are no firm plans at present (but recurrent funding has been confirmed for Locality Partnership Chairs). The teams that deliver these activities will remain as part of the ICB at this stage and are aware that future changes may include further service and system consultation in the next financial year.

## **6. EQUALITY IMPLICATIONS**

The ICB collaborating with its partners will ensure that all approaches are fair and equitable to the population of North Somerset.

A clear framework will be established to ensure we can evaluate both our successes and learnings from activities that are being undertaken.

### **AUTHOR**

Kirstie Corns – Head of Woodspring Locality

Kate Debley – Locality Development Manager for One Weston, Worle and Villages Locality

### **BACKGROUND PAPERS**

N/A