

## TRAFFORD COUNCIL

**Report to:** Health Scrutiny Committee  
**Date:** 28<sup>th</sup> June 2022  
**Report for:** Information  
**Report of:** Sara Radcliffe, Acting Joint Accountable Officer,  
Trafford CCG, Gareth James, Acting Joint Accountable  
Officer, Trafford CCG

### Report Title

Integrated Care System Update – Readiness Assessment

### Summary

This paper outlines Trafford's response to the *Locality Model Mobilisation – Readiness Assessment* as agreed by GM ICS Transition Programme Board. This has been completed in partnership with the constituent members of the Trafford Locality Board and presented for approval, as a Trafford system response to the exercise, by the Trafford Locality Board at their meeting on 14<sup>th</sup> June.

The report provides the Committee with an update on progress on the following subjects / areas of work: New system components that are ready to deliver; the Trafford Locality Board; Trafford Provider Collaborative; Clinical and Care Professional Leadership; Trafford's Neighbourhood Model; Trafford's Population Health System; Innovation, Discovery & Spread; Place Based Lead for Integrated Care and Team and; CCG Close Down operations.

### Recommendation(s)

Health Scrutiny are asked to note the content of this report and progress to date

Contact person for access to background papers and further information:

Name: Thomas Maloney, Programme Director Health and Care, Trafford Council/Trafford CCG

**Locality Model Mobilisation – Readiness Assessment**  
**Submission of Trafford Locality Board**  
**June 2022**

**Introduction**

1.1 This paper outlines Trafford response to the Locality Model Mobilisation – Readiness Assessment as agreed by GM ICS Transition Programme Board. This has been completed in partnership with the constituent members of the Trafford Locality Board and will be presented for approval, as a Trafford system response to the exercise, by the Trafford Locality Board at their meeting on 14<sup>th</sup> June.

1.2 The paper is set out in two parts;

New System Components that are Ready to Deliver:

- Trafford Locality Board (TLB)
- Trafford Provider Collaborative Board (TPCB)
- Trafford Clinical and Practitioner Senate (TCAPS)

System components to continue to deliver transformation;

- Neighbourhood Model
- Population Health System
- Innovation, Discovery and Spread
- Leading the System: Place Based leader for Integrated Care and Team

**New System Components that are Ready to Deliver**

2.1 In March 2022 the GM ICS Transition Programme Board actioned each GM Locality to submit a completed readiness assessment. The readiness assessment aims to understand localities progress against the required components of an effective GM Operating Model, and is set in the context of the Health and Care Bill's overarching aims for Integrated Care Systems (ICSs):

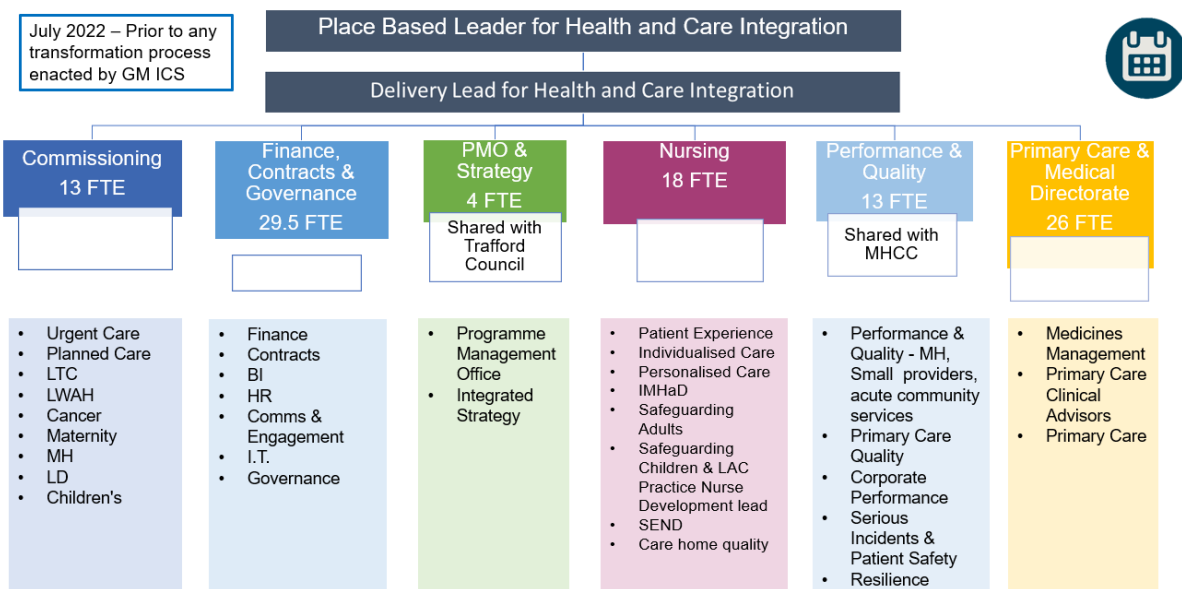
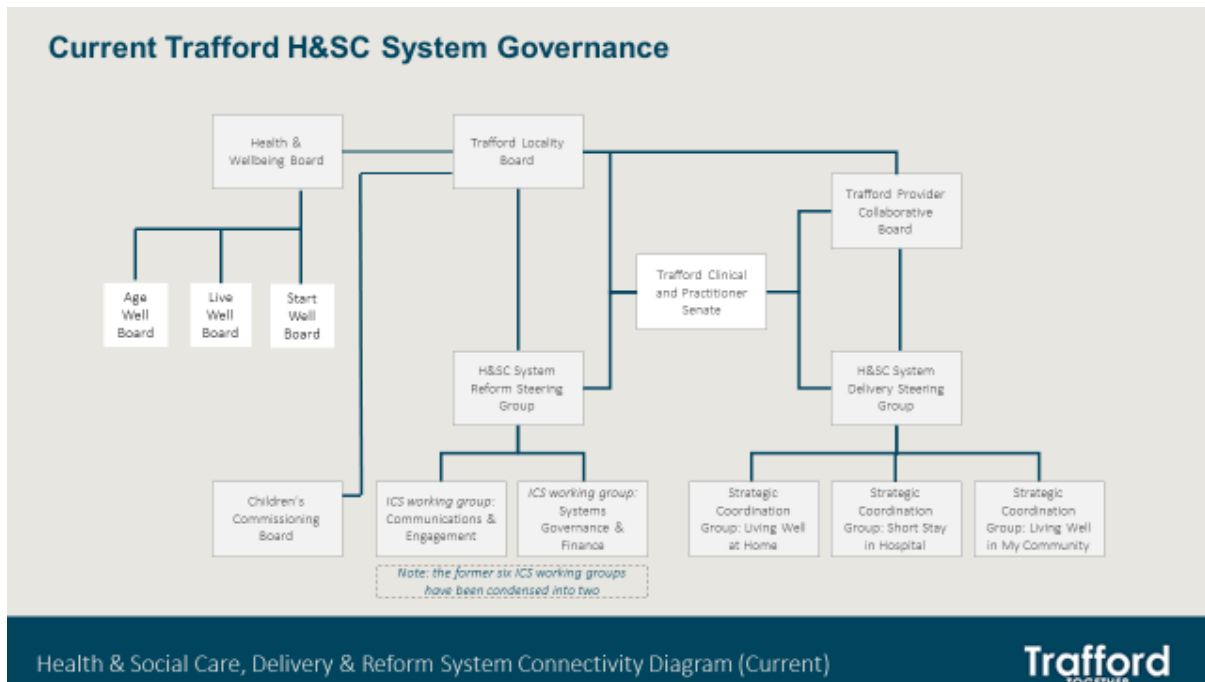
- Improving population health and healthcare
- Tackling unequal outcomes and access
- Enhancing productivity and value for money
- Support broader social and economic development

2.2 The operating model for Greater Manchester has emphasised three main elements of the model which come together to respond to those objectives and establish the integrated care system:

- The Locality Approach (Internal to GM)
- GM Provider Collaboratives (Internal to GM)
- The establishment of GM Integrated Care and the GM Integrated Care Partnership (National Readiness to Operate which will be applied by NHSEI)

2.3 As a Trafford system we have already outlined our approaches in responses to core design questions on two previous occasions, this process is intended to build on those previous exercises.

2.4 Trafford is ready to take forward integration on July 1<sup>st</sup> 2022 through the structures it has put in place. The governance structure is outlined below. We have 6 established teams all with leadership which will lift and shift into the Greater Manchester Integrated Care. These teams will be led by the Delivery Lead under the Place Based Lead. Collectively the teams will be known as Trafford Locality Team: NHS Greater Manchester. The diagrams below outline the components of our Trafford structure and our teams.



## Trafford Locality Board

- 3.1 The TLB was initially established in April 2021. The Board operated with a broad membership of locality partners, with the membership being revised in September 21. A draft set of ToRs was agreed at the board in March 22, with the agreement they remain flexible through shadow arrangements, and that additions and amendments are expected, and will be made with agreement of its constituent partners.
- 3.2 An in-principal agreement was reached at the May Board that we will continue with the consultative forum arrangement we have in place and; “To operate on the basis that this forum and a s75 committee, established to manage existing s75 agreements between Trafford NHS CCG (the CCG) and Trafford Borough Council (TBC), will sit at the same time as the wider TLB, establishing clear “lines of sight” between the TLB and s75 committee(s)”.
- 3.3 On this basis a revised Terms of Reference is being tabled for approval at the June (14<sup>th</sup>) meeting of the Board. It is proposed that the Board functions going forwards as set out above, which is that the Section 75 committee and current consultative forum meet at the same time and become two elements of the Board. The proposed revised terms of reference operate on this basis. It is important to note this as a holding position to be kept under review and considered further at TLB in December 2022 or whenever is appropriate due to National/GMIC developments. Legal advice has been sought throughout via Hill Dickinson, and as a system we will continue to access professional support when required and beneficial. We will keep the revised Terms of Reference under review and development, as Section 75 arrangements are developed and as the integration agenda continues to evolve in GM and nationally.
- 3.4 The current Section 75 arrangements between Trafford Borough Council and the CCG (which will transition to the ICB) require updating and refining as part of the transition process. At the moment there are three commissioner Section 75 arrangements between the Council and the CCG (Learning Disability Commissioning, Better Care Fund, Children’s Clinical Commissioning). The intention is that the three sets of Section 75 arrangements with the CCG will be replaced by one Section 75 agreement, underpinned by an aligned (not pooled) budget and that these arrangements will come within the scope of the Board. The proposed terms of reference anticipate that such detail will be added later once the arrangements are finalised. Further updates to the terms of reference will therefore be needed to fully incorporate these arrangements in due course
- 3.4 We currently have a Co-Chair set of arrangements whereby the Leader of Trafford Council and the Chair of the CCG, chair our Locality Board. Options are currently being explored with partners and a proposal will be brought to the July meeting of the Board for approval. It should be noted that previously there has been broad support for an NHS clinician from one of the Trafford Partners and Trafford Council Leader joint-chair arrangement. The Board be asked to agree this approach in principle on the 14<sup>th</sup> June. The System Governance Working Group will then explore various options around a NHS clinician from one of the Trafford Partners in respect of joint-chair arrangement, which may include:
  - Member of Trafford GP Board

- Chair or member of Trafford Clinical and Practitioner Senate
- Clinician or NED from a Trafford partner

Membership currently includes Councils, NHS provider trusts (acute and mental health), primary care, VCFSE and Healthwatch.

3.5 TLB focusses on the shared priorities within the Trafford Together Locality Plan and, by working together, improve health, wellbeing and care for the population of Trafford. This is underpinned by principles of partnership, building stronger communities, putting residents at the heart of what we do and continually improving to make best use of combined resources. The purpose of the Board is, therefore, to:

- Agree the shared priorities and strategic direction for health and care in Trafford, linked to future role of Health & Well Being Board (H&WBB)
- Ensure that all elements of NHS and local authority services are aligned with the shared Trafford strategic direction
- Work together to ensure integrated and aligned delivery across health and care
- Agree resource allocation within the scope of responsibilities delegated to it
- Act as the interface with Greater Manchester Integrated Commissioning Board (GM ICB) and Greater Manchester Health and Social Care Partnership (GM H&SCP)
- Ensure that local people have the opportunity to influence strategy and local service provision

### **Trafford Provider Collaborative Board**

4.1 In Trafford the TLB has convened a TPCB to lead on the delivery of the Locality Plan objectives and mobilised a TCAPS – the TPCB has been operational from November 202.

4.2 There has been a commitment whilst in shadow arrangements that the draft ToR remain flexible. Additions and amendments to this ToR are expected and will be made with agreement of its constituent partners. It is anticipated they will be in relation, but not limited to, the items set out below. Further work will commence on the ToR once the TLB ToR have been formally agreed (June – July 22).

- Clarity on Greater Manchester and Trafford operating models
- Agreed governance of the TLB
- The financial strategy and framework
- A ways of working framework

4.3 The purpose of the TPCB is to be the engine room of the TLB shaping, co-designing and delivering health and care services in line with the priorities of the Trafford Together Locality Plan. The TPCB will embed a dispersed leadership model that enables strategic collaborative planning from all partners and works within the financial allocations whilst maximising Trafford's resources.

4.4 The TPCB formally reports into the TLB. The Board includes all NHS providers across primary, community, local acute, mental health, and Council plus a VCFSE and Care Home representative – our current out of hours primary care provider is also a core member of the Board.

- 4.5 TPCB has recently undergone an independent operational effectiveness review and a draft action plan has been developed, which will form in due course, the development plan for the next 12-24 months. Progress against the plan will be reported through the TLB where appropriate.

### **Clinical and Care Professional Leadership**

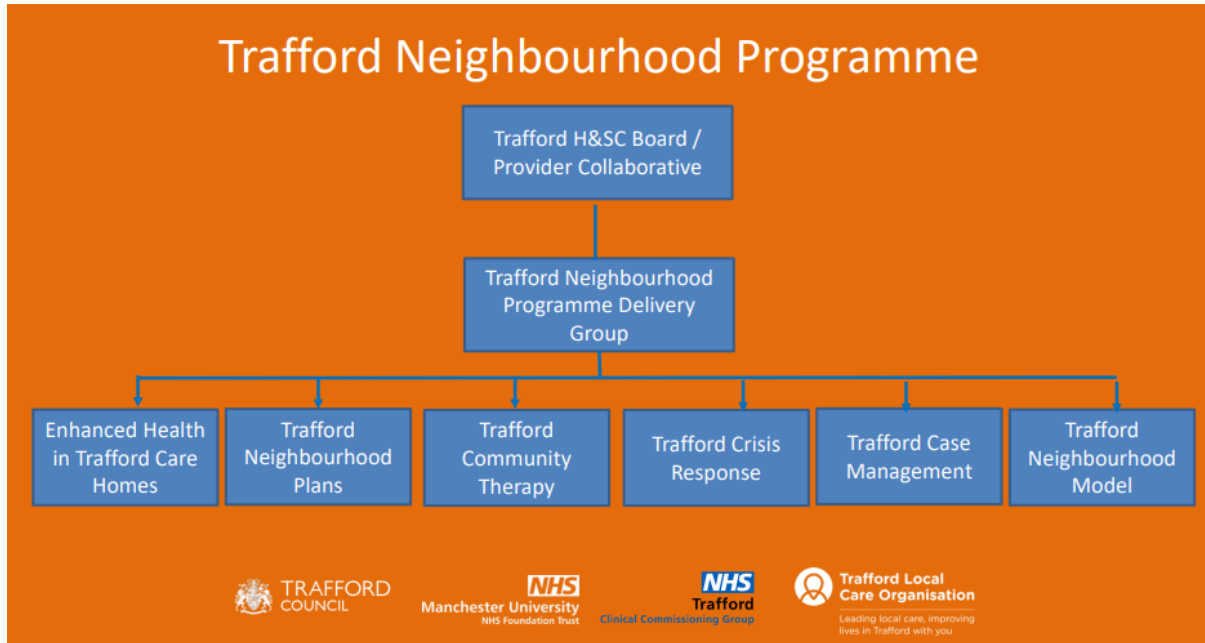
- 5.1 The TLB has convened and mobilised the TCAPS. The purpose of TCAPS is to provide a single point of clinical and practitioner oversight of community-based health and care provision across Trafford with involvement in the design, planning and delivery functions of TPCB arrangements.
- 5.2 TCAPS is an advisory group that enables clinicians and practitioners from all locality organisations and sectors to gather as a group to influence both strategically and operationally in the planning and design of change. This includes commissioning and delivery – valuing equally the contributions of all partners and professionals to implement evidenced based services whilst retaining the collective enthusiasm to innovate.
- 5.3 TCAPS has a core membership representative of all professional sectors in Trafford. It can invite specific attendees, clinicians, and officers of partnership organisations with distinct backgrounds, experience, and expertise for key agenda items as and when required appropriate to delivering its vision, and outcomes.
- 5.4 The Chair of TCAPS maintains a key link with the TLB, attending to make recommendations to the TLB on key issues faced on the delivery of care to residents and communities. This ensures mechanisms are in place to refer, escalate issues and concerns faced by frontline practitioners and ensure strategic influence for the development and challenges of services.
- 5.5 TCAPS has an agreed draft ToR which will be refreshed following agreement of TLB ToRs expected in June 22. A draft work plan for TCAPS has been curated by its members and this relates to the priorities identified by the TPCB, ensuring the correct clinical and practitioner input throughout all stages. TCAPS has also formalised a relationship with its counterpart body in Manchester and this pan-locality model can be seen in each of the respective ToRs.
- 5.6 It is important to note Trafford GP's have mobilised a Trafford GP Board representing four out of five PCN's. It has coproduced and agreed its ToR and recently elected a Chair. It is currently agreeing its representation into the Trafford health and social care system governance.

### **System components to continue to deliver transformation**

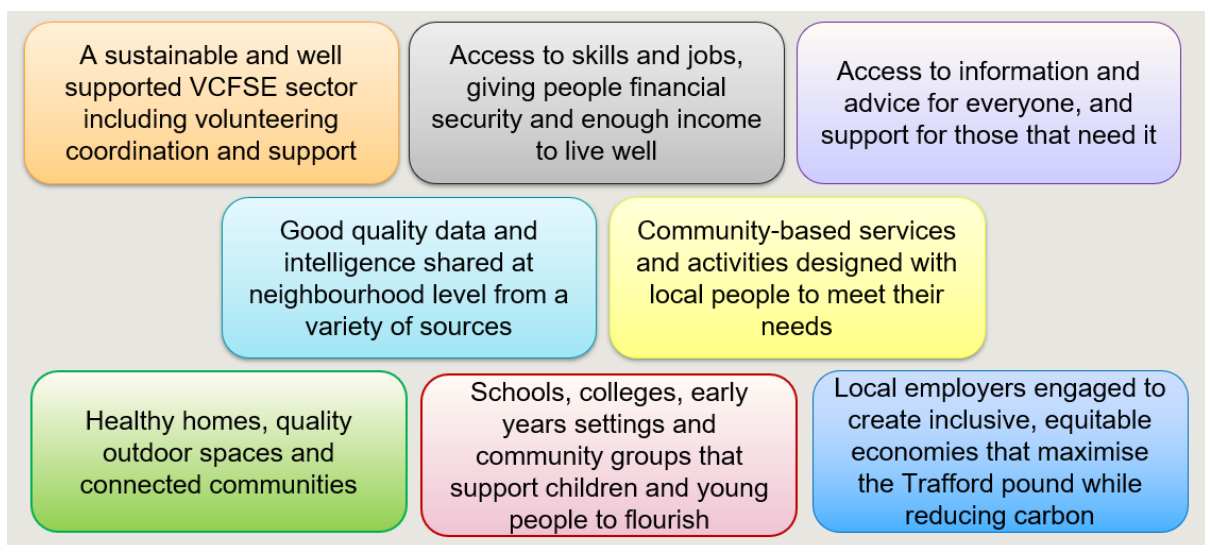
#### **Neighbourhood Model**

- 6.1 Building on neighbourhood approaches in health and social care our 2019-24 Locality Plan put the neighbourhood model at the forefront of its ambitions. It is the central element of an aspiration to have better connected communities. The refresh of our Locality Plan in December 2020 emphasised the importance of an effective and multi-

disciplinary neighbourhood model across health and care. With strategic leadership from our TLB and the TCPB overseeing the operationalising of the model we desire. We now have a robust programme methodology in place which coordinates the Trafford Neighbourhood Programme. The diagram below outlines how this work is progressed in our system.



6.2 Our neighbourhood model connects to the VCFSE and wider public services to address the social determinants of health. This work is driven through our established 'Living Well in My Community' (LWIMC) Strategic Coordination Group (SCG) which focusses on both health and care, and the wider determinants, closely linking to our work on an inclusive economy. The building blocks of LWIMC can be seen below:



### Population Health System

7.1 Reducing health inequalities is a key priority of our Trafford Together Locality Plan and intrinsic in the purpose of our TLB, TPCB and other system governance. Reducing

health inequalities also underpins Trafford council's corporate strategy, and is listed as one of three corporate priorities in Trafford's Corporate Plan 2021-24:

- Reducing health inequalities in Trafford
- Supporting people out of poverty
- Addressing the climate crisis

7.2 As a key corporate priority, Trafford's work to reduce inequalities is monitored through target setting and outcomes that can be measured. Trafford is also working with partner organisations to help identify shared ways of reducing inequalities through partnership working and pan-locality approaches. Specific goals under this corporate priority to reduce inequalities include:

- Prevent poor health in children and promote good mental and physical health.
- Ensure Trafford's mental health services are resilient, accessible and fit for purpose.
- Ensure more people are in good health for longer.
- Focus on areas of deprivation and with the highest rates of illness, and reduce the impact of deprivation.
- Work with partners to improve how services are delivered, and to help reduce health inequalities.
- Provide effective and sustainable physical activity and sport opportunities for our communities

7.3 Targeted neighbourhood plans have been developed to address these inequalities at a local level, with alignment to an NHS Core20PLUS5 approach. A partnership measurement framework to tackle inequalities has been developed and agreed indicators are utilised to assess local health inequalities, tied to the GM Marmot indicators. A data and evidence-led approach has been adopted to inform population health approaches. Local plans and strategies are reviewed to ensure alignment with this goal and to the corporate plan aim of reducing inequality in the borough. Plans and strategies are also reviewed and drafted alongside partners in forums such as the TLB and TPCB.

7.4 The ways of working of Trafford's Health and Wellbeing Board are currently under review following two workshops ran by the Local Government Association. Further workshops are planned for July and September to conduct a deep dive into key thematic areas linked to health inequalities in the borough, such as mental health and smoking cessation. Firm commitment to coproduction with partners and the community is stated within Trafford's refreshed Locality Plan 2021, building upon best-practice examples from newly implemented ways of working during the Covid-19 pandemic

7.5 Trafford is committed to working with system partners and the community (such as Leisure, Housing Providers, Residents' Associations etc.) to ensure full use of local assets to address social determinants of health. Services and interventions are commissioned based on reviews of data and evidence such as local JSNA data, service and system data with outcomes set and monitored at a neighbourhood level. Social value is a key aspect of Trafford's commissioning and procurement strategy informing tender assessment. A social value tool is in operation to enable the tracking of delivery against contracts.



- 7.6 Trafford's Locality Plan also outlines a key area of focus is establishing early intervention and preventative approaches, with a commitment to taking action early and making every contact count. This approach underpins related strategies, such as Trafford's Mental Health Transformation Strategy.
- 7.7 Trafford's VCFSE Strategy remains a firm commitment as set out in Trafford's Locality Plan and will be signed off across key partners over July 2022. Through the last year, the sector has been organising itself by developing the Trafford Community Collective, which became a registered Charitable Incorporated Organisation Associate Model in March 2021.
- 7.8 The vision for Trafford's VCFSE Strategy 2022-27 is: "That Trafford has a strong and diverse Voluntary, Community, Faith and Social Enterprise sector which plays a key role in strengthening communities and delivering shared priorities" Alongside the development of the strategy, re-procurement of the VCFSE infrastructure service contract has been underway; the new service will be launched on 1st October 2022.
- 7.9 We have established a new joint working model for Communications and Engagement as a Greater Manchester Integrated Care Partnership working group with buy-in across system partners. Working group priorities include effective system and stakeholder communications and development of a multiagency approach to ensuring public, patient and community engagement in the design, planning and delivery of services.
- 7.10 Trafford has established a Health Protection and Health Emergency Resilience Board as a partnership Board which brings together organisations and services with a responsibility for Health Protection and Health Emergency Resilience in Trafford. The aim of the Board is to consolidate health protection and health emergency resilience planning, advice, and response, reduce risk, and promote an effective response, and reduce inequality of impact.

### **Innovation, Discovery & Spread**

- 8.1 Trafford is committed to working with providers to develop research and innovation in health. TPCB will act as a forum to enable the sharing of opportunities for evidence studies and clinical trials to accelerate GM position as a world leader in this area. Locally we will coordinate and quantify Trafford's contribution and forge local relationships to aid and accelerate the GM approach/ambition.
- 8.2 TPCB will also act as a forum for partnership working and the fostering of strong industry relationships between providers in the sector to support local economic growth, inward investment, and life science sector development across GM – making connections with wider system governance to nurture dynamic and diverse partnerships.
- 8.3 We have been an active partner in the innovation discovery and spread of digital innovation over the last 3 years and we envisage that this will continue in the new system. Trafford's Digital Ambition is to 'work with Trafford health and care partners to enhance and modernise services through the use of digital approaches and solutions' and works with our newly established governance to deliver this ambition. Through these forums, Digital in Trafford collaborates and co-produces solutions to issues facing local communities.

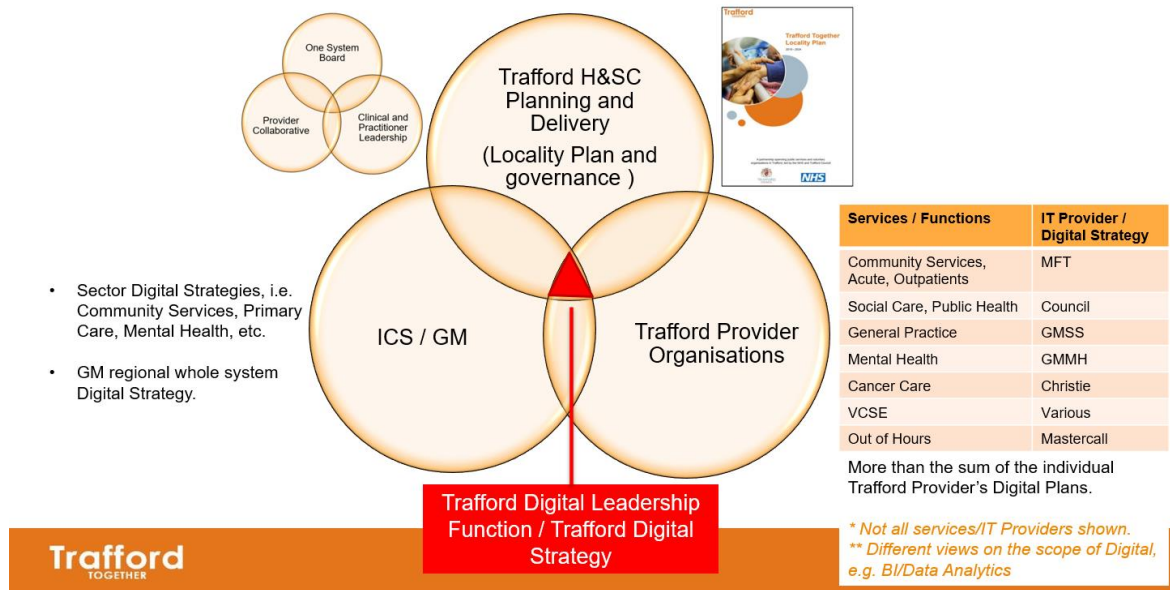
8.4 The Trafford Digital Strategy articulates how digital activity and approaches will support improved outcomes and enable the Trafford Together Locality Plan. It has been developed from a CCG, Primary Care and Social Care perspective so far but incorporates aspects from Trafford Local Care Organisation. Work has begun to include all partners input and to align to their individual digital strategies and resource plans. The Trafford and Manchester Digital Board is currently acting as the overarching governance forum for Digital and all partners are represented on the board. The strategy aligns with the GM Digital Maturity and Investment Framework and Trafford continues to support GM digital and data workstreams.

8.5 Trafford's Digital Ambition is delivered through five themes:

- Digital Borough: Enhance the digital skills, access and confidence of those digitally excluded within Trafford. Work with partners and industry to improve the digital infrastructure within Trafford and explore opportunities for economic growth linked to digital.
- Digital Services: Provide a wider range of high-quality digital services built around the patient/citizen experience. Ensure that online content is clearly written and accessible. Explore opportunities to automate processes.
- Digital Workforce: Provide employees with modern digital tools so they can work more flexibly and can collaborate across different organisations. Provide training and business change support on the new tools.
- Digital Organisations: Provide modern digital infrastructure and systems to support new ways of working. Ensure the organisations' data and systems are well protected from cyber threats. Align systems and infrastructure across partners.
- Digital Support: Provide improved digital services and support from the Trafford providers' IT and Digital Teams. Enhance self-service provision and automation of support processes. Ensure support teams are sufficiently trained.

8.6 Trafford currently operates a locality-based health and care digital leadership function which provides and coordinates leadership, collaboration and governance across most partners. The creation of the ICB presents an opportunity to formalise this approach and to strengthen relationships, and joint working, across the locality and with GM. The diagram below shows the connections between partners, strategy, delivery and associated governance at varying spatial levels:

## Digital in the ICS and Trafford Provider Collaborative



### Leading the System: Place Based Lead for Integrated Care and Team

- 9.1 In order to deliver what the system has worked upon, and agreed for 1<sup>st</sup> July, the creation of the PBL is a pivotal post. Trafford has agreed its PBL with GMIC as Local Authority Chief Executive under a holding arrangement. With a commitment from the TLB to considering the potential for all options going forward, including the possibility of Trafford developing its own model (“the Trafford Option”).
- 9.2 The position in relation to the GM ICB is still evolving and it is recognised that it is a system which will be in transition over the next 12 months and potentially beyond. It is against that background that we have come to a view that whatever we propose for Trafford at this stage needs to be an effective holding position; building on the positive relationships and collaborations which exists to date; enabling us to flex and evolve as we test those relationships and as the system in GM settles and stabilises. The role will fulfil the required deliverables and accountabilities as set out within the agreed framework.
- 9.3 The PBL will be supported by the delivery lead, and in turn the 6 established teams in Trafford, therefore creating a sustainable and robust leadership team that will be able to enable the system to be ready for 1<sup>st</sup> July and also deliver for the future. Trafford has also remodelled its governance structure that supports the 6 teams. Thereby ensuring there will be no break in continuity for effective oversight and delivery when the CCG is disestablished, and before GMIC has implemented the accountability structures relating to the localities.

### Conclusion

- 10.1 Trafford, with leadership through its TLB, is ready to carry on with functions and governance as outlined for the 1<sup>st</sup> July 22. It awaits clarity from GMIC in terms of an

accountability agreement between GMIC and the locality through the PBL. It recognises that this will be an evolving transition through the next 6-12 months.