

TRAFFORD COUNCIL

Report to: Health Scrutiny Committee
Date: 17th January 2024
Report for: Information
Report of: Gareth James, Deputy Place Lead for Health and Care Integration, NHS GM (Trafford)

Report Title

GM Integrated Care Partnership Update

Summary

The purpose of this report is to provide an update to Health Scrutiny Committee on recent developments across the Greater Manchester Integrated Care system that affect the Trafford Locality. The report covers the following areas:

1. NHS GM Transformation Programme
2. NHS GM Operating Model
3. The Contribution of Locality Plans to the 2024-25 GM System Delivery Plan
4. GM People and Communities Participation Strategy & Trafford Integrated Care Partnership Participation Framework
5. Winter Capacity Funding
6. Establishment of Locality Quality Group
7. NHS GM CQC assessment readiness

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: Gareth James, Deputy Place Lead for Health and Care Integration, NHS GM (Trafford)

1. NHS GM - Transformation Programme

1.1 The GM transition programme officially launched in August 2022. The overarching aim of the programme was to transform GM functions to deliver efficient and effective services and to provide clarity to our staff on new permanent roles within revised structures.

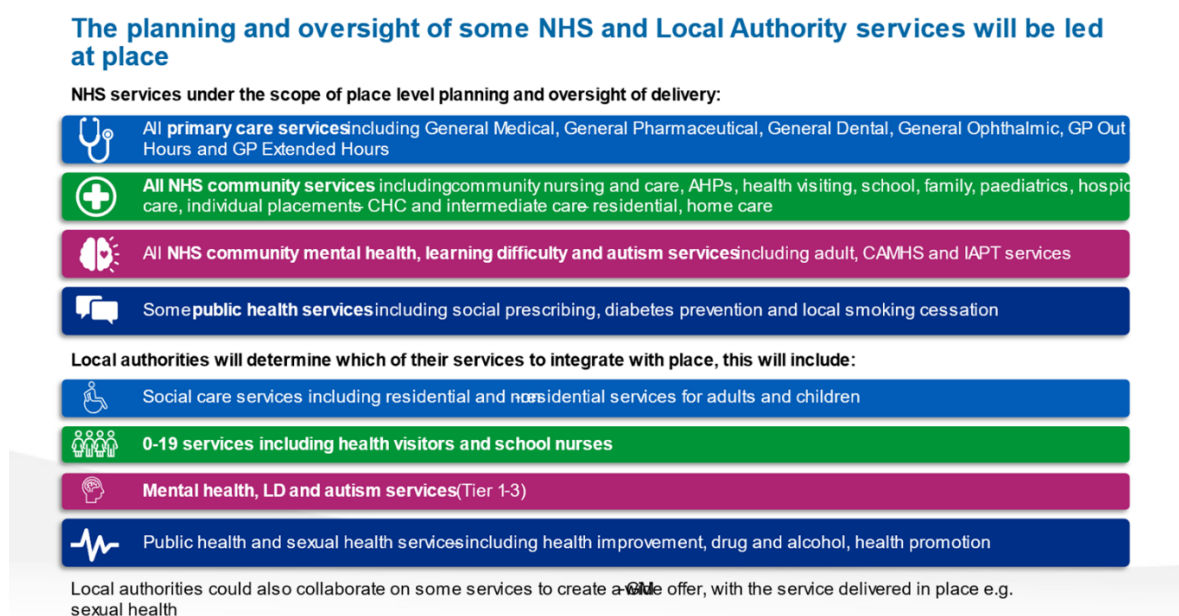
1.2 Originally the target programme closure was April 2023. Due to the complexity of the programme the timeframe slipped to September 2023 with the formal closure on 31 October 2023. The process to find suitable alternative employment for displaced staff will continue until December 2023.

1.3 Following a lengthy and complex process more than 1600 colleagues have moved into new permanent positions. There remains a small number of staff who are potentially displaced and, therefore, working with GM colleagues to find suitable alternative roles within the new structures. There are currently no Trafford colleagues in this position.

2. NHS GM – Operating Model

2.1 The GM operating model has been agreed by the GM Integrated Care Board and work continues to agree how this will be implemented (proposed full implementation by 01/04/24). To recap, the model confirms the NHS services under the scope of place level planning and oversight of delivery as follows:

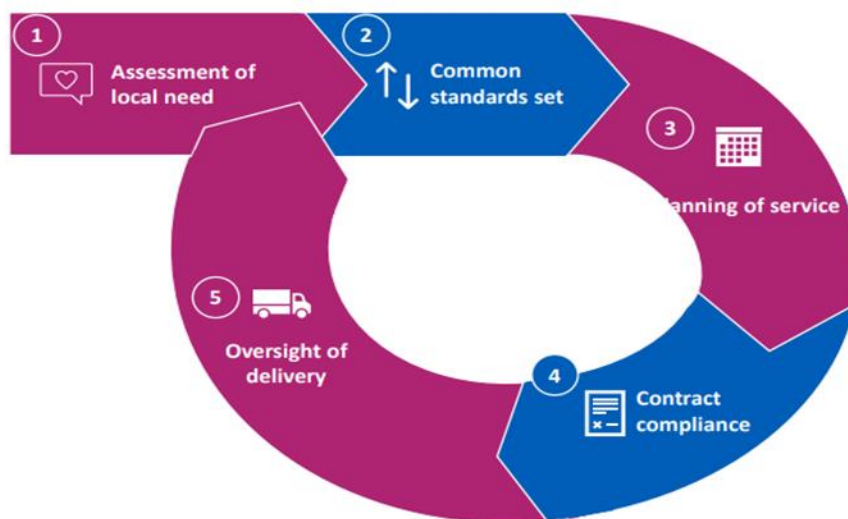
Figure 1:



2.2 A series of workshops are being held to further understand the implications of the agreed operating model and, in particular, further understanding of the responsibilities across localities and at a GM level. Workshops in October and December have concentrated on the following key areas:

- GM approach to commissioning for improved outcomes; aims to provide a joined-up approach to commissioning for health and care, including identifying areas for decommissioning. Also, to describe a methodology to assess services against and describe the governance route for decision.
- Impact of financial recovery on the commissioning process
- Locality commissioning approach; aims to set out developing thinking around place-led commissioning and agree proposed approach for each stage of the agreed commissioning cycle contained in the published operating model:

Figure 2:



- Service line review – assessment of ‘what gets done where’
- Commissioning of community services; as above but specific to the planning and oversight of community services at place.

2.3 These areas are being further refined throughout January – February 24 to shape the role of Locality Plans in contributing to GM’s overall delivery plans for 2024/25 (See section 3. Below for more detail) but is important to note the ICS Operating Model confirms the core role of localities in driving population health improvement and delivering preventative, proactive integrated models of neighbourhood care. Although localities are delivering across all six of the missions in the ICP Strategy, our key areas of responsibility principally relate to the missions on stronger communities and helping people stay well and detecting illness earlier.

3. The Contribution of Locality Plans to the 2024-25 GM System Delivery Plan

3.1 The Locality Board and Trafford Health and Wellbeing Board have previously committed to refresh the Trafford locality plan with an aspiration to create one plan for health and care in Trafford by integrating the aims and aspirations of the current health and wellbeing strategy and refreshing the detail of the current

Locality Plan. This is consistent with the expectation from GM and the work of the majority of localities.

3.2 A time limited strategy group has been formed to strategically steer the development of this work, with the group having its inaugural meeting on the 29 November 2023. Attendance from partners was excellent which led to an insightful and thought-provoking discussion which centered on several key themes:

- It is imperative we build the plan acknowledging the needs of our population
- Our collective priorities should build from previous commitments in our existing Locality Plan and HWBB Strategy, as we generally understand our areas for improvement
- Be guided by relevant planning guidance and existing strategy, and associated action plans
- Be cognisant of the outputs of the Strategic Financial Framework and roles and responsibilities of the newly agreed GM Operating Model
- Maximize the population health and prevention opportunities in GM, already a key component of our existing Health and Wellbeing Strategy
- The financial restraints in which we are individually and collectively operating, both in the short, medium and long term

3.3 The collation of existing intelligence and people insight from across our partnership has been mobilised with a wealth of intelligence already submitted from partners. This intelligence will be critical in ensuring the voice of Trafford people is taken into account and the commitment remains that, where we have gaps in our knowledge, we will engage with the public using our excellent VCFSE networks as the conduit. As part of the overall programme plan it is envisaged a task and finish group will be formed to lead on the required public engagement and manage its work programme, reporting to the strategy group and upwards appropriately through our governance structures.

3.4 Greater Manchester's approach to planning for 2024/25 is different to that of previous annual operational plans - We will develop a broad, System Delivery Plan for GM rather than solely a response to the NHS guidance. There are three elements to the planning approach:

- The role of localities in driving population health improvement and prevention at scale. Upgrading our approach to prevention will need to be a major part of GM's overarching plan for 2024/5.
- The role of providers in planning for activity, workforce, and finance to improve productivity through the NHS operational planning process.
- The role of GM commissioning to drive the changes needed.

3.5 A proposal has been constructed that suggests we develop a Locality Delivery Portfolio for 2024/5 comprising of:

- The outputs from the commissioning intentions process. These will be consolidated to a GM level but we will need to describe what delivery looks like in localities.
- A set of priorities for 2024/5 identified by each individual locality – drawing on existing locality plans, the GM ICP Strategy and Joint Forward Plan, the Prevention Framework, Strategic Financial Framework and other GM plans.
- A small number of priorities that all 10 localities agree to focus on in 2024/25.

3.6 The Locality Delivery Portfolio would then be built into the 2024/5 GM System Delivery Plan and updated Joint Forward Plan. Localities have been asked to complete a first draft set of 2024/25 priorities by 16th February 2024.

3.7 In summary Trafford is engaged in the outlined process to achieve a set of agreed Trafford system priorities that contribute to the GM System Delivery Plan 24/25 but in parallel will continue the work to refresh the Locality Plan which would provide a longer term, multi-year plan that will improve the health, care and wellbeing for Trafford people and its communities.

4. GM People and Communities Participation Strategy & Trafford Integrated Care Partnership Participation Framework

4.1 NHS GM have recently issued a draft People and Communities Participation Strategy via locality communications and engagement link officers and locality groups, where they exist. The draft strategy has been discussed at our Trafford Locality Communications and Engagement Working Group (Nov 23) and feedback from the group has been shared with the GM team to inform future versions of the document. The revised version of the GM Strategy is being brought to the February Locality Board for further discussion.

4.2 The strategy aims to strengthen communities by building systematic participation in health and care which fully aligns with the draft Trafford Engagement Framework previously supported by the Locality Board (October 23). A piece of work to 'retrofit' the Trafford Framework and associated actions plans to the content and language of the GM strategy will occur through January – March 24 once a final version of the GM strategy has been supported by the GM Executive, which is anticipated to be March 24. This work has already commenced and will be fine tuned where required once formal adoption of the strategy is communicated.

5. Winter Capacity Funding

5.1 Partners agreed the utilisation of the additional capacity funding of £1.7 million in accordance with an agreed set of principles. The locality team received support from GM to mobilise the schemes relating to primary care. As reported to the Locality Board in November, we also received a weighted share of an additional £2 million to mobilise surge hubs to provide additional capacity to relieve pressures on the health and care systems.

5.2 The following schemes were mobilised from 4th December 2023:

- Additional Same Day Appointment capacity across all 26 practices. This will provide additional 15,000 appointments to support urgent admission avoidance.
- Acute Surge hub; the hub will deliver from Trafford General Hospital by Mastercall operating for 7 days per week, 8 hours per day. This service will offer face to face appointments and is anticipated to provide up to 5,750 appointments.
- Acute Visiting Service (AVS); again delivered by Mastercall this service will operate for 8 hours per day supporting all of Trafford with up to 350 additional appointments.

5.3 The Trafford locality team have been working with general practice partners to agree robust reporting to ensure we can measure the impact on the agreed key metrics. This will include qualitative data in addition to the raw numbers so that we can demonstrate the impact on other parts of the health and care system. For example, data will be captured indicating the treatment that patients would have received had the additional primary care appointments not been available.

6. Establishment of Locality Quality Group

6.1 NHS GM governance arrangements require each locality to have a locality quality group to fulfil the requirements of the National Quality Board.

6.2 A scoping session with Trafford partners took place on the 11th December to explore in detail the introduction of the Trafford Locality Quality Group (TLQG). The inaugural meeting of the group will take place on 8th January 2024. This group is intended to establish a space for key partners to:

- Construct a shared narrative around quality and safety
- Jointly identify priorities
- Discuss and evaluate quality in terms of pathways
- Establish system focussed learning and improvement plans that where needed, will have positive change impacting directly on patient experience
- Addressing health inequalities, patient experience and co-production will be key drivers in establishing shared objectives

6.3 Localities are also required to provide a bi-monthly quality update to the NHS GM System Quality Group (known as a flash report). Within the report localities provide details of key and emerging risk areas as well as areas of good news and sharing of learning.

6.4 Partners fully supported the implementation of the Trafford Locality Quality Group and the subsequent development of quality assurance reporting to the Locality Board in 2024.

7. NHS GM CQC Assessment – Trafford Locality Readiness

7.1 The Health and Social Care Act 2022 gives the Care Quality Commission (CQC) new regulatory powers that allow them to offer meaningful and independent assessments of Integrated Care Systems. This is a core ambition in the CQC's current strategy and will enable them to provide independent assurance to the public of the quality of care in their area.

7.2 The CQC aim is to understand how integrated systems are working to tackle health inequalities and improve outcomes for people. This means them looking at how services are working together within an integrated system, as well as how the systems are performing overall.

7.3 The reviews will take into consideration the core purpose in integrated care systems, as referenced in NHS England's Design Framework and the requirements of the legislation. They will focus on 3 themes:

- Quality and Safety
- Integration
- Leadership

7.4 We are advised that the NHS GM's initial CQC Assessment will take place around April 2024. In readiness for the assessment, localities have been asked to undertake a self-assessment to help us establish, prior to assessment what evidence there is for each evidence category and where there may be gaps.

7.6 Evidence categories will be RAG rated and should any gaps be identified; action plans will need to be developed to demonstrate actions to improve. To support this, a self-assessment exercise has been piloted in Stockport Locality and has been shared with all Associate Directors for Nursing & Quality for them to produce the same for their own localities.

7.7 Information and evidence will need to be obtained locally from various internal and external areas/organisations/sectors such as Primary Care, Commissioning, Safeguarding, MFT, GMMH and our VCFSE partners. The timeframe for the locality self-assessments to be completed, signed off in locality and shared with NHS GM central quality team is 31 January 2024.

7.8 A Trafford task and finish group has been established and will meet weekly. The group will be focused on gathering contributions from ICB colleagues, and other key stakeholders will be invited to contribute where needed.

7.9 Trafford Locality Quality Group (TLQG) will steer the self-assessment and is the forum that corrals partner contributions where appropriate and the task and finish group will provide updates into TLQG. Initial briefings have already taken place verbally at Trafford Provider Collaborative Board on 30 November 2023, as well as at the Health and Social Care Steering Group on 6 December 2023. Following a further discussion at the first meeting of LQG regular updates will be provided throughout locality governance prior to submission to GM Quality Team on 31 January 2024.