

Scrutiny Health & Social Care Sub- Committee Supplementary Agenda



6. Croydon's Integration Journey to Date (Pages 3 - 16)

The Sub-Committee is provided with a presentation on Croydon's Integration Journey to inform its discussion.

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Croydon is the 'place' to be

**Our progress towards more
integrated health and care
in Croydon**

28 January 2020

Matthew Kershaw
Trust Chief Executive and Place
Based Leader for Health
NHS Croydon CCG and Croydon
Health Services NHS Trust

Agenda Item 6





A joined-up approach for people in Croydon

The 'One Croydon' Alliance began delivering real benefits to people in our borough in 2017

- Formal partnership between local GPs, Croydon CCG, CHS, SLAM, Croydon Council and Age UK Croydon
- Increasingly coordinating our care and support for the borough

Croydon is a forerunner in collaborative working

We are working together to improve health and wellbeing in our community

- One Croydon focussed initially on caring for people aged over 65
- The Alliance has now extended its remit to consider the health needs of people of all ages in the borough

Award-winning Alliance praised for 'system-wide leadership' and having a 'real impact' in improving peoples' lives

Rated "GOOD" by the Care Quality Commission for LIFE community reablement service

Building on the success of One Croydon

Croydon Health Services NHS Trust and NHS Croydon CCG are aligning to support the implementation of a 'place-based' model and address our challenges

- Changing demographics
- Growing health inequalities
- Patients leaving the borough for elective care
- Financial burning platform
- National workforce shortages across health and social care

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The ultimate goal of greater alignment

- Improve health outcomes
- Better quality care
- Financially sustainable services
- System transformation
- With health and care staff working together
- Supporting recruitment and retention in the borough



One Croydon: Our Journey to 'total place'





Our progress to date includes



Croydon Health Integrated Safeguarding Team

Combining Trust and CCG expertise to strengthen our protection for children and vulnerable people

- Tightening our safety-nets
- Increasing oversight of children looked after
- Greater compliance with statutory health assessments
- Joining up resources, expertise and knowledge
- Better team learning and development

Community pharmacists now part of Integrated Community Networks. The team can see 100 domiciliary patients a month, with secure access patient records in primary and secondary care

Joint Pharmacy Team

Chief Pharmacist across Trust and CCG in play since 2017, paving the way for closer integration

- Better patient care and experience
- Better understanding of medicines management across hospital, community and primary care
- Reducing waste
- Saving money





Joint financial control total

A first for Croydon, and for London

Getting the best possible spend for the Croydon pound

- Making the resources we have go further
- Agreeing the targets we will work towards to fund service improvements
- Helping to return the local health economy to financial surplus

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The joint control total has enabled the Trust and CCG to move from transactional negotiations about money to transformational delivery of quality and service changes for the benefit of patients and staff.



Investing more time and effort in service transformation

- Financial alignment has removed planning barriers
- Release time and effort to be invested in
- Quality Improvement
- Patient experience
- Access and performance
- Service transformation

Both the Trust and CCG are planning together to deliver a joint control total of £2.4m in 2020/21



Shared leader(ship)



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Trust CEO and 'Place Based Leader' for Health

- A role not yet replicated elsewhere in the country
- Responsible for the vision, strategy and delivery of health services in Croydon



Joint management teams and functions

- Single place-based leadership team
- Full alignment across provider services, finance, clinical leadership, strategy and transformation
- Executive responsibilities spanning both Trust and CCG
- Further work underway to enhance and coordinate clinical leadership
- Leadership transformation teams across CHS and CCG



The difference we're making

Ken, 92, had stopped leaving home and developed Diabetes Type 2, mobility and balance problems, anxiety and depression, while looking after his chronically ill wife. He was partnered with PIC, Karen.

Personal Independence Co-ordinators (PICs) from Age UK Croydon are enabling older people, to keep well and enjoy a better quality of life

PICs work with each person to set and meet personal goals

Ranging from health changes, like joining a weight-loss programme, to socialising, or practical help with transport so they can make trips into the local area

PICs meet with community nurses, GPs, pharmacists and social workers to discuss the wellbeing of each patient



"With the extra help, I feel better in myself and able to get on with the day to day."

- Ken, Croydon resident



The difference we're making

Norman met the LIFE team while recovering in hospital from a fracture. They arranged for him to stay in a care home after leaving hospital, where he received daily physiotherapy, rehabilitation and support. Within two weeks Norman had returned home with his wife.

LIFE (Living Independently For Everyone). Helping people after hospital stays, keeping them well, and often preventing hospital admissions in the first place

Within two hours: after a hospital stay, care workers visit patients after their arrival at home

Within 24 hours: LIFE team home assessment to agree care plan

LIFE A&E liaison team: More than 900 hospital admissions avoided in 6 months



"We are able to better support people so they can make progress before they go home, with a joined-up, holistic approach between health and social care."

- Steve Shevel,
LIFE senior community physiotherapist,

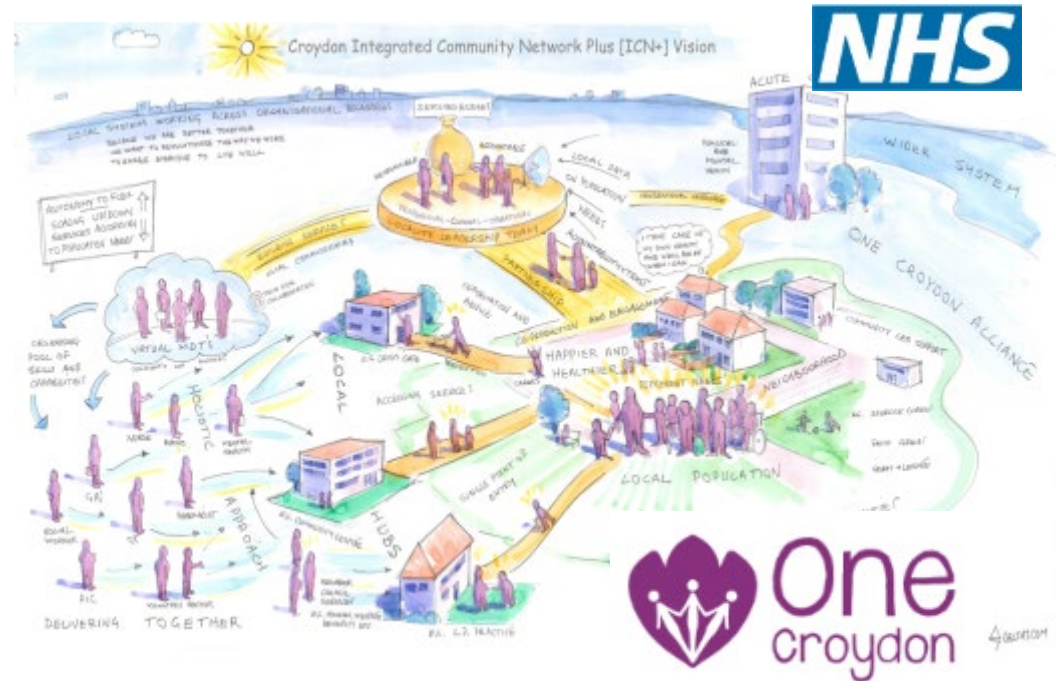
The future

Moving from demand management to meeting health needs

- First phase of ICNs reduced hospital admissions by 18% in 18 months
- Next phase brings health and care professionals together to focus on the particular needs of people in their neighborhoods

Thorton Heath, March 2020

- First in phased approach across the borough.
- Using data to understand specific needs of people living in the area
- Setting up community reference group to understand residents' views



New Integrated Community Networks+

- 'Talking points' at community venues – for people to drop in for advice on how to connect with the support around them
- Supporting grassroots community activities through Local Voluntary Partnerships
- Social prescribing – from ping-pong to ballroom dancing.
- Helping to improve health wellbeing and active community participation

SWOT analysis of alignment



Strengths

- **Croydon partnership working** building on the success and delivery to date of the One Croydon alliance and the partnerships within it
- **Staff are our strongest assets** developed a joint executive team and beginning to bring together operational teams to drive transformation
- **Removing barriers** and organisational silo working
- **Ahead of the curve locally and nationally** developing what we need for Croydon and responding to the long term plan
- **Strong local relationships and a clear vision** making the necessary changes we need for integrated care to work
- **Progress with changing how we work** making changes to our patient pathways

Weaknesses

- **Alignment is health only** at this initial stage, a stepping stone for wider system integration
- **Focus on governance** necessary but can mean energy is spent on this and not building relationships and changing how we work
- **Capacity** need to integrate whilst still delivering now
- **Need to develop CHS as provider of choice** improve and promote experience, quality and outcomes of care to further encourage local people to 'choose Croydon'
- **No easy path to follow** this is new - we need to carefully manage changes and risks - we don't yet have huge experience in this – no one to learn from

Opportunities

- **Potential to improve outcomes for patients** by joining up services and looking at the underlying health issues rather than treating illness
- **Interesting and varied careers for staff** across the system
- **Single focus on quality and financial management** aligned governance focussing on single quality, operating and financial strategy
- **Creating a shared culture** programme of organisational development and staff engagement
- **Sharing best practice** through national forums
- **Improve patient outcomes** through more efficient and effective services and put Croydon on the map
- **Improve care for patients** more rapidly and sustainably through collaboration, rather than competition

Threats

- **Conflicts of Interest** responsibilities related to commissioning, procurement and contracting will remain a CCG only function
- **Financial challenge** dominates the agenda reducing focus on quality, outcomes and experience
- **Impact of change on staff** some will deal with change better than others and could impact on morale
- **Distracts us from the day job** and delivering on our current and distinct priorities
- **Limited management and clinical capacity** to deliver change
- **Change that patients and staff see takes time** maintaining morale and the appetite for change will be crucial

Conclusion and next steps



Croydon as a 'place' has already made significant progress

- Integrating our way of working is changing how some of our services work
- Driving improvements for patients, the public and staff.
- We need to maximise our strengths and opportunities whilst mitigating weaknesses and threats
- This is our focus of our work over the coming months



One Croydon priorities

Croydon's Health and Care Plan highlights the work we will do together over the next few years in six priority areas



Prevention and proactive care



Better start in life



All disabilities



Locality development



Mental health



Modern acute care

Progress with establishing the Health and Care Board with the necessary clinical and managerial relationships is crucial as is the work on transforming pathways of care

Improving the health and care of people in Croydon

Questions and discussion

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“We’re seeing patients not as conditions to be fixed, but as people to be empowered supporting to live healthier and healthier lives”

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