



Cabinet

Report title: Progress report on Lambeth Together: Integrating Health and Care in Lambeth

Wards: All

Portfolio: Cabinet Member for Adults and Health: Councillor Jacqui Dyer

Report Authorised by: Fiona Connolly: Acting Strategic Director for Adults and Health

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Report summary

The purpose of this report is to provide an update on the work that has taken place to integrate health and care in Lambeth. The report sets out eight recommendations for Cabinet to enable this programme of work to progress to the next stage, including changes to leadership and governance.

Cabinet is also being asked to agree to the next phase of development for Local Care Networks (LCNs) in the borough, and for officers from the Council and Clinical Commissioning Group (CCG) to develop the approach to procurement.

The report follows the report of November 2017 where Cabinet were asked to agree to establish Lambeth Together and the associated transition programme as the means of creating an integrated system for health and care in Lambeth.

Finance summary

There are no direct financial implications arising from this report. Integrating health and care in Lambeth is likely to have substantial financial implications which will be detailed in future reports as Lambeth Together progresses. It is expected that aligning resources will lead to better value. Savings resulting from integration are assumed in the Council's Medium Term Financial Strategy and therefore integration with health is necessary to achieve the Strategy.

Recommendations

1. To note progress to date in integrating health and care in Lambeth, and to confirm Lambeth Together as the means for delivering our integrated health and care ambitions in Lambeth as part of the South East London Integrated Care Systems approach.
2. Agreement to overall scope of Local Care Networks (LCNs) for Neighbourhood Based Care and Wellbeing.
3. Agreement to develop a proposed procurement approach, subject to formal decisions of CCG/Council in Quarter 4 2018/19. This will include shadow arrangements for 2019/20 and full contract arrangements for 2020/21.
4. Agreement to seek formal support across partner organisations to endorse these recommendations and approach - to include securing commitment for the 2019/20 shadow arrangements.
5. Agree to progress the development of proposals on future governance for Lambeth Together from April 2019. This will include the role of the Health and Wellbeing Board and Committee/s in Common.
6. Agree to progress with and develop proposals for future integrated Council/CCG leadership of Lambeth Together.

1. CONTEXT

- 1.1 Lambeth is a place of innovation. We are creating new ways of working so that we can better support local people's health and wellbeing. We refer to this as Lambeth Together. We have started to develop more collaborative health and care services which have benefitted staff and service users and we want to build on the progress we have made so far. In order to do that, we are now at a point where we need to further develop our governance and leadership arrangements, to enable us to better align our resources to achieve better value.
- 1.2 There are strong strategic and policy drivers for system level integration of health and care. An integrated system offers the potential to overcome artificial organisational barriers and better align financial incentives across health and social care. There is the potential for greater system wide efficiencies compared to models of care with separate, often competing accountabilities. The developing national experience of system integration provide the basis for considering an ambitious approach to integration in Lambeth.
- 1.3 In South East London (SEL) more widely, partners have been working together across health and care to create a 'system of systems' model of integration – building our system up from local borough partnerships (the equivalent of Lambeth Together for all six boroughs), alongside collaborative arrangements more broadly where that makes sense such as NHS commissioning/contracting from pan-borough NHS Trust providers. The SEL approach has been successful to date in being incorporated into a national 'Aspiring Integrated Care Systems (ICS)' programme – building towards a potential shadow arrangement in 2019/20.
- 1.4 A fuller description of Lambeth Together, its vision, aims and principles for working can be found in appendix A.

2. PROPOSAL AND REASONS

Recommendation 1: To note progress to date in integrating health and care in Lambeth and to confirm Lambeth Together as the means for delivering our integrated health and care ambitions in Lambeth as part of the South East London Integrated Care Systems approach.

- 2.1 Over the last 12 months partners and stakeholders have been working together on three main areas of Lambeth Together: The Strategic Alliance, the Delivery Alliances, and Culture and Ways of Working. This section of the report describes the progress made to date.
- 2.2 Fig. 1 The Lambeth Together Framework

The Lambeth Together Way

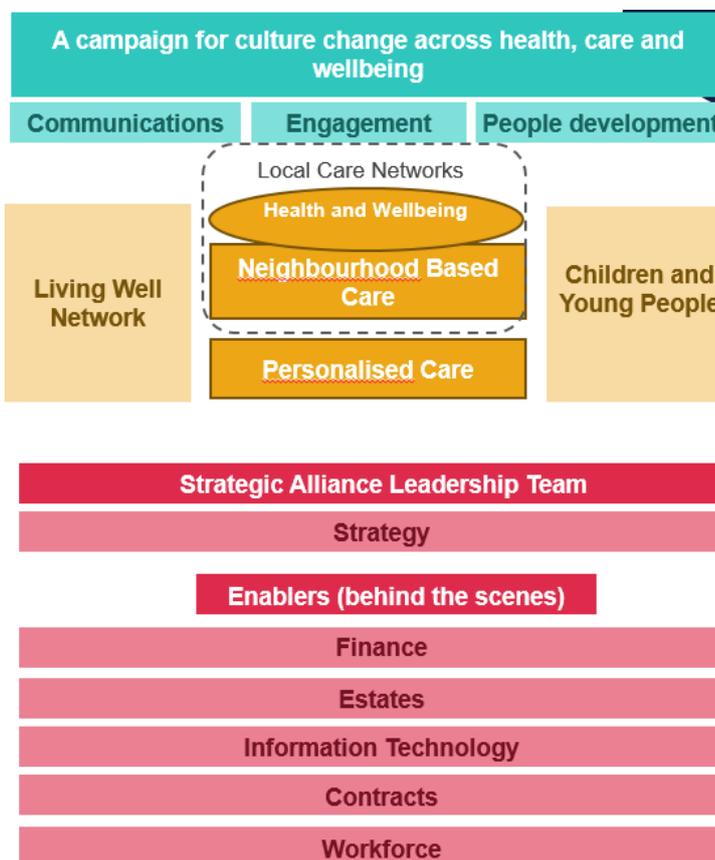
A way of working and a culture that defines and unites us, developed with citizens and staff and embedded in all we do.

The Delivery Alliances

Moving away from basing services around organisations and make them based round people and places

Lambeth Together Strategic Alliance

A single leadership and set of integrated functions and governance to create 'one system, one budget'



Lambeth Together Strategic Alliance

2.3 The Strategic Alliance is the partnership of public and voluntary sector organisations within Lambeth that come together to provide single leadership, and the necessary governance and functions for Lambeth Together. Over the last 12 months, the Strategic Alliance has put in place the following, as part of the transition programme:

- Agreed the vision, objectives, outcomes, ways of working and communications for Lambeth Together;
- Shadow leadership arrangements including the Alliance Leadership Team Meeting, which brings senior leaders together bi-monthly to drive and oversee the creation of an integrated health and care system, and the Project Team, which is responsible for the delivery of the transition programme;
- Begun work on a single strategy for Lambeth Together; and,
- Published a Lambeth Together 'Pledge', signed by all partners to confirm their commitment to Lambeth Together.

Delivery Alliances

2.4 The Delivery Alliances are the partnerships and contractual arrangements that will be put in place for integrated service delivery. Each Delivery Alliance focuses on a different population group.

Living Well Network Alliance

2.5 There has been significant progress over the past year in developing our Delivery Alliances, and in particular with the implementation of the Lambeth Living Well Network Alliance (LWNA) on July 1 2018. This formalised the Living Well Network into an alliance contract, demonstrating a commitment to integrated commissioning between health and social care, collaborative commissioner-provider working and a co-productive approach. The LWNA has a range of functions to support those adults who are experiencing mental distress or at risk of experiencing mental illness and distress. The

services include employment and housing support. Further information on the LWNA can be found in the March 2018 [Cabinet report](#).

- 2.6 Work is taking place to improve services as part of the LWNA. Areas of work include improving in-patient acute care, improving the crisis pathway, applying learning from the Independent Personal Support Allowances (IPSA) work so far to other areas, developing Living Well Centres to provide a borough-wide triage function to make sure people receive appropriate support, and improving person centred care for people with moderate or severe mental health problems.
- 2.7 Other service development areas include:
- Supported Accommodation and Community Support Framework: Exploring the potential to procure a framework agreement for supported accommodation/community support which would allow for quicker, easier procurement and longer term strategic partnerships with providers; and,
 - Primary Care Support Services: Exploring potential to procure strategic primary care delivery partner for the Alliance to support service delivery and strategic development of the LWNA.
- 2.8 Community engagement is an important part of how the LWNA works, and since the Alliance was formalised in July, it has continued to engage residents and partners working with Black Thrive, Lambeth Collaborate, and Health Watch.

Local Care Networks (LCNs)

- 2.9 Three Local Care Networks (LCNs) were established in 2015, initially as a means of improving the health of people with long-term and complex conditions. LCNs were established to bring together health and care services for these people, and also to better connect them with other support and activities in their local area that might improve their health and wellbeing
- 2.10 Three locality-based LCNs are well-established partnerships in Lambeth focussed on improving the health and wellbeing of local people by services and communities working together. A key achievement has been connecting people, community organisations with health and care staff, breaking down boundaries and building trust.
- 2.11 LCNs have supported the development of a care coordination pathway to improve patient experience; care and outcomes for people with complex multiple long term conditions.
- 2.12 Within Lambeth, local services, communities and staff continue to pioneer new ideas, innovations and projects year on year. These initiatives contribute to making improvements in health and care. Partners developed the future plans for LCNs, and in particular the integrated model for Neighbourhood Based Care and Wellbeing in Neighbourhoods. The proposals arising from this work are described in section 2.21 – 2.25. A more detailed description of the next phase for LCNs is included in Appendix B.

Children and Young People

- 2.13 Lambeth Council, CCG and its partners have a well-established approach to integrated working, including commissioning, planning, delivery and co-production focused on improving outcomes for children and young people. There is an Integrated Children's Commissioning Team across the CCG and Council; and a range of jointly-commissioned and funded programmes across Social Care, Education and Health. There are strong governance and partnership arrangements across the Children and Young People's Partnership Board and through Commissioning Groups including the CCG Children and Maternity Board.

2.14 [Our Children and Young People's Plan](#) was launched in March 2018, and is the key driver for the approach for improving outcomes and working together across Children's Services in Lambeth (including Education, Health and Social Care). It brings together statutory and voluntary agencies, including schools, to deliver improved outcomes in five key; SEND, Children at Risk, Looked After Children/Care Leavers and the following areas:

- Better Start: focused on improving outcomes from maternity to school age, bringing together children's centres, LEAP, health visiting and childcare providers;
- Early Help: developing local early intervention integrated locality services, including linking in with our CYPHP programme; and,
- Lambeth Made: our innovative campaign to ensure all people, businesses and sectors come together to support Children and Young People in Lambeth.

2.15 Work has begun to see where there are opportunities to further develop the Children and Young People's work as part of Lambeth Together.

Personalisation Alliance

2.16 Work has begun to scope a potential Personalisation Alliance. This Delivery Alliance relates to support provided across the Council and CCG to disabled people. We know that disabled people are living longer due to medical progress and that we have more work to do to improve outcomes and support people to live well in their community of choice, for example through the work of Transforming Care for people with learning disabilities.

2.17 Some of the alternative models are as costly or most costly than residential care, e.g. the costs of supporting physically disabled people across health & care in Lambeth have grown by around 7% over the past two years. Many disabled people have lifelong needs, and so we need to look at how we provide effective support from childhood to adulthood.

2.18 We are currently undertaking benchmarking and analysis of costs and activity led by the Council and supported by Grant Thornton including children's and adults services and we will review this work and assess how we should scope our work and what an integrated model might look like. We believe that there are opportunities for further work to support small numbers of people with complex needs across South East London and the South London Partnership building on the experience of work such on Transforming Care and the South London Partnership (SLP) Forensic Partnership.

Culture and ways of working

2.19 Successful integration relies on a combination of structural and cultural change. The experience and outcomes of our residents will only really change when our workforce are able to collaborate with families, statutory and voluntary sector partners to provide the care and support people need. Cultural change towards listening to, working alongside and engaging with our community are important part of creating a joined up system.

2.20 The Lambeth Together partners have tested a series of learning activities for staff, stakeholders and residents working or engaged in the health and care system. By learning together, there are often opportunities to build new relationships, as well as gaining some of the skills necessary for integrated working. Learning and development activity has included:

- asset base community development, appreciative enquiry and ethnographic taster sessions;
- Multi-agency / multidisciplinary training programme for care-coordination with resources from Health Education England;

- Bringing together organisational development leads from partner organisations to establish OD programme to support Lambeth Together; and,
- Running a series of large-scale change master classes across LCN partners and stakeholders.

Recommendation 2: Agreement to overall scope of Local Care Networks (LCNs) for Neighbourhood Based Care and Wellbeing

Recommendation 3: Agreement to develop a proposed procurement approach, subject to formal decisions of CCG/ Council in quarter 4 2018/19. This will include shadow arrangements for 2019/20 and full contract arrangements for 1920/21

Recommendation 4: To endorse the proposals for the 1919/20 shadow arrangements.

- 2.21 Over the next year we expect to see further progress on the Delivery Alliances, and in particular the LCNs Delivery Alliance. The proposal for evolving LCNs into Neighbourhood Based Care Wellbeing is set out in Appendix B, and includes the need to reduce inequalities, address fragmentation and variable outcomes, and respond to changing health needs and the gap in funding for local public services.
- 2.22 The development of this Delivery Alliance follows the principles established by the Lambeth Together Strategic Alliance of moving towards 'one system, one budget'. The proposals entail establishing a 7 - 10 year partnership contract, based on alliance principles, with an estimated financial envelope of between £125m and £175m per annum. It will bring health, care, and voluntary and community organisations together in partnership within one budget to deliver a set of shared outcomes for the adult population of Lambeth.
- 2.23 There are a wide range of services in scope for this Delivery Alliance, which will come under the new contracting arrangements from 2020. This includes services currently provided by the Council such as adult social care for older people and physically disabled people, including community and domiciliary care, and staying healthy services. From April 2019, these services will be more closely aligned with other health and care services in scope for the LCNs, and work will take place to develop the outcomes and design for neighbourhood level service integration.
- 2.24 Over the next three months work will take place to develop a proposed approach to procurement, which will be brought back to the Council and CCG for approval. An alliance contract was the preferred approach for the LWNA Delivery Alliance, and options will be developed on the appropriate contractual and integration model for this Delivery Alliance. Proposals for governance and leadership, outlined in section 2.26 – 2.31 will also be developed in time for shadow arrangements to be put in place in April 2019.
- 2.25 From April 2019 this Delivery Alliance will move into a shadow phase, with partners across the health and care system working together to deliver a detailed implementation programme to design and agree the final scope of the LCNs, and put in place the enablers for this, including governance, finance, contracting and procurement, and workforce. The contract is due to take effect from April 2020.

Recommendation 5: Agree to progress the development of proposals on future governance for Lambeth Together from April 2019. This will include the role of the Health and Wellbeing Board and Committee/s in Common.

- 2.26 The changes set out in the proposal will require appropriate governance to be put in place to provide leadership, oversight and accountability, and the legal mechanism by which partners can take

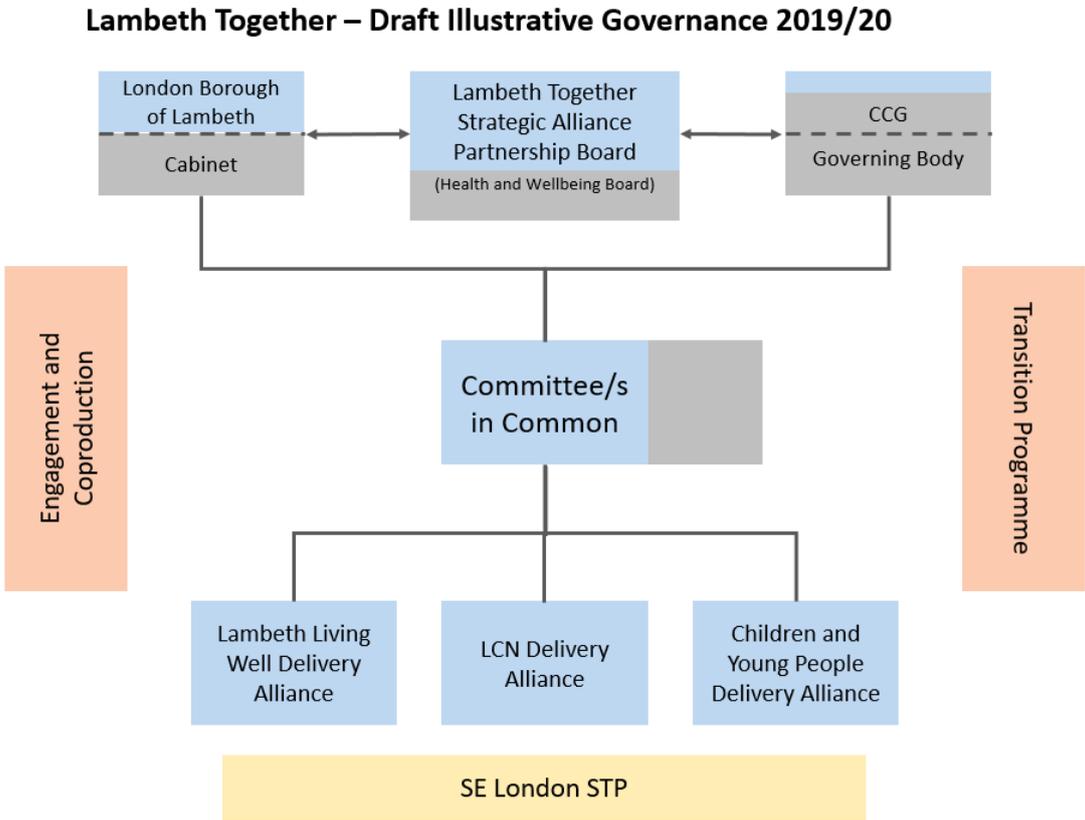
decisions together. The governance in place currently for local partnership working includes the Health and Wellbeing Board (HWB), which was established as part of the 2012 Health & Social Care Act, and has been in operation in Lambeth since 2013. The Lambeth Together Leadership Group was established in January 2017. There is some crossover in membership and increasingly the two groups are considering similar papers on the components of joint work and integration in the borough. The HWB (in common with other places) has limited formal powers, it is not a decision-making body for the partnership and is constituted as a formal committee of the Council. The HWB's primary purpose is to act as a partnership forum between local government and the NHS.

2.27 CCGs have limited options for joint governance under the 2006 Health Act as amended by the 2012 Health & Care Act. This is out of date for the purposes of the kind of integrated work we are embarking on locally and nationally but there are no plans to amend legislation to give greater flexibilities. The CCG has been using Committees-in-Common arrangements to enable alignment of decisions with partners. This is based on legal advice as to the mechanisms allowed under current legislation. Trusts and local authorities have more flexibility on the variety of partnership mechanisms they can use.

2.28 Lambeth Together will continue to learn from national and local models of governance for integration so this is well aligned with the developing integration work in South East London and London. Before the shadow arrangements for the LCN Delivery Alliance take effect, the Lambeth Together partners will need to agree what governance will be needed. These proposals will be brought back for Council and CCG approval early in 2019.

2.29 The diagram below has been produced to illustrate how a governance model might look and, alongside other options, will be reviewed and considered before a proposal is recommended early in the New Year.

Fig. 2 Diagram to show illustrative governance for 2019/20



Recommendation 6: Agree to progress with, and develop proposals for future integrated Council/CCG leadership of Lambeth Together.

- 2.30 There is a need for stronger leadership arrangements for Lambeth Together as a whole, and in particular to lead the operationalization of the transition plan. The CCG and Council have had integrated commissioning arrangements in place for some time, with a number of commissioning staff jointly employed by the CCG and Council. There has also been a joint management team meetings, and work to explore how corporate functions can be brought together to help deliver the Lambeth Together programme. As described above, the programme has had shadow leadership arrangements in place over the last 12 months, with staff from across the partnership working closely together, but this will need to be formalised in the coming year, leading to further integration between the Council and the CCG.
- 2.31 The (Acting) Strategic Director for Adults and Health at the Council and Chief Officer of the CCG will be tasked with developing the leadership proposals, which will be presented to both organisations and appropriate stakeholders and regulators early in 2019.

3. FINANCE

- 3.1 The integration of health and care in Lambeth is likely to have substantial financial implications for the Council which will be explored in greater depth as Lambeth Together progresses. The Council's Medium Term Financial Strategy (MTFS) assumes savings from integration and therefore Lambeth Together is critical to achieve the strategy.
- 3.2 The strategic direction is to work to 'one system, one budget' and to align CCG and Council income and expenditure projections to define the sustainability challenge – including for the wider system locally and across SEL. Evidence and modelling will be built on and further developed to demonstrate the service and financial costs/benefits of integration.
- 3.3 The approach will be based on 'best value' prioritisation. We will have a 'shadow' LCN Delivery Alliance approach for 2019/20, during the process of 'procurement' for 2020/21.
- 3.4 The CCG and Council will produce a joint Medium Term Financial Strategy which sets out the expected resources of both organisations and how they are going to be used to jointly deliver a strategy for Lambeth that is financially sustainable. This will identify how we balance the total available resource against changes in objectives, policies and movements in the cost base arising from pressures such as inflation, population and non-demographic growth, while improving outcomes. It is likely the services from the Council that would be included in the joint strategy would be those most aligned to Health and Care. The exact scope will be determined over the coming months with an expectation that an MTFS can be produced starting in 2019/20. The development of a MTFS will support the management of 'one system, one budget' and allow longer term planning of financial resources. The joint MTFS will align with the Council's own MTFS.

4. LEGAL AND DEMOCRACY

- 4.1 There are no direct legal implications arising from this report.

- 4.2 This proposed key decision was entered in the Forward Plan on 14 September 2018 and the necessary 28 clear days' notice has been given. The report will be published for five clear days before the decision is considered by Cabinet. Should it be approved, a further period of five clear days, the call-in period, must then elapse before the decision becomes effective. If the decision is called-in during this period, it cannot be enacted until the call-in has been considered and resolved.

5. CONSULTATION AND CO-PRODUCTION

- 5.1 The Lambeth Together partnership seeks to understand the needs, concerns and experiences of residents on an ongoing basis so we can better deliver the best possible services. We understand that positive health and wellbeing outcomes for the people of Lambeth can only be achieved if local people remain at the heart of everything we do.
- 5.2 There is a large body of engagement and involvement work already in existence originating from the range of organisations forming Lambeth Together, and more widely (for example the South East London Sustainability and Transformation Partnership). Existing mechanisms and structures for engagement are diverse and manifold, ranging across standalone events, consultations, ethnographic studies, involvement networks and forums and citizen representation on organisational governance groups for example. Lambeth Healthwatch, Patient Participation Group Network and the patient and public involvement (PPI) teams across partner organisations are integral to Lambeth Together.
- 5.3 Given this rich resource of engagement and involvement activity and expertise, a review of the outputs from prior activities has been undertaken in order to guide development of the Lambeth Together strategy and priorities – ensuring that these are built from the existing foundation of what local people have already told us.
- 5.4 Going forwards, local people and stakeholders will be involved in the priorities and plans of the Lambeth Together programme and we will ensure that both strategy and delivery are informed by and developed with local people. Governance arrangements will be transparent and proactively garner input from local communities.

6. RISK MANAGEMENT

- 6.1 There are no direct risks arising from the recommendations set out in this report. The recommendations are to agree that further work take place to develop LCNs and the appropriate governance and leadership. As part of this work, and as the design of LCNs are agreed, partners will identify and agree risks and mitigations.

7. EQUALITIES IMPACT ASSESSMENT

- 7.1 This report provides information on progress to integrate health and social care. The purpose of integration is to improve the health and wellbeing of Lambeth people, by increasing value for money, better collaboration between a range of commissioners and providers of services and taking a more holistic approach to commissioning and providing health and social care. The LCN proposal (Appendix B) provides the case for why this change is being made and one of the key drivers is to tackle health inequalities and improving outcomes across the population. Examples of health inequalities are provided between Lambeth and national measures as well as within Lambeth. As the strategy for integration develops further more specific EIAs should be considered for these elements of the strategy and monitored. However, as tackling health inequalities and improving

health & wellbeing outcomes for the most disproportionately affected populations is a key driver for integration we expect the impact of integration to be largely positive for these groups.

8. COMMUNITY SAFETY

8.1 None.

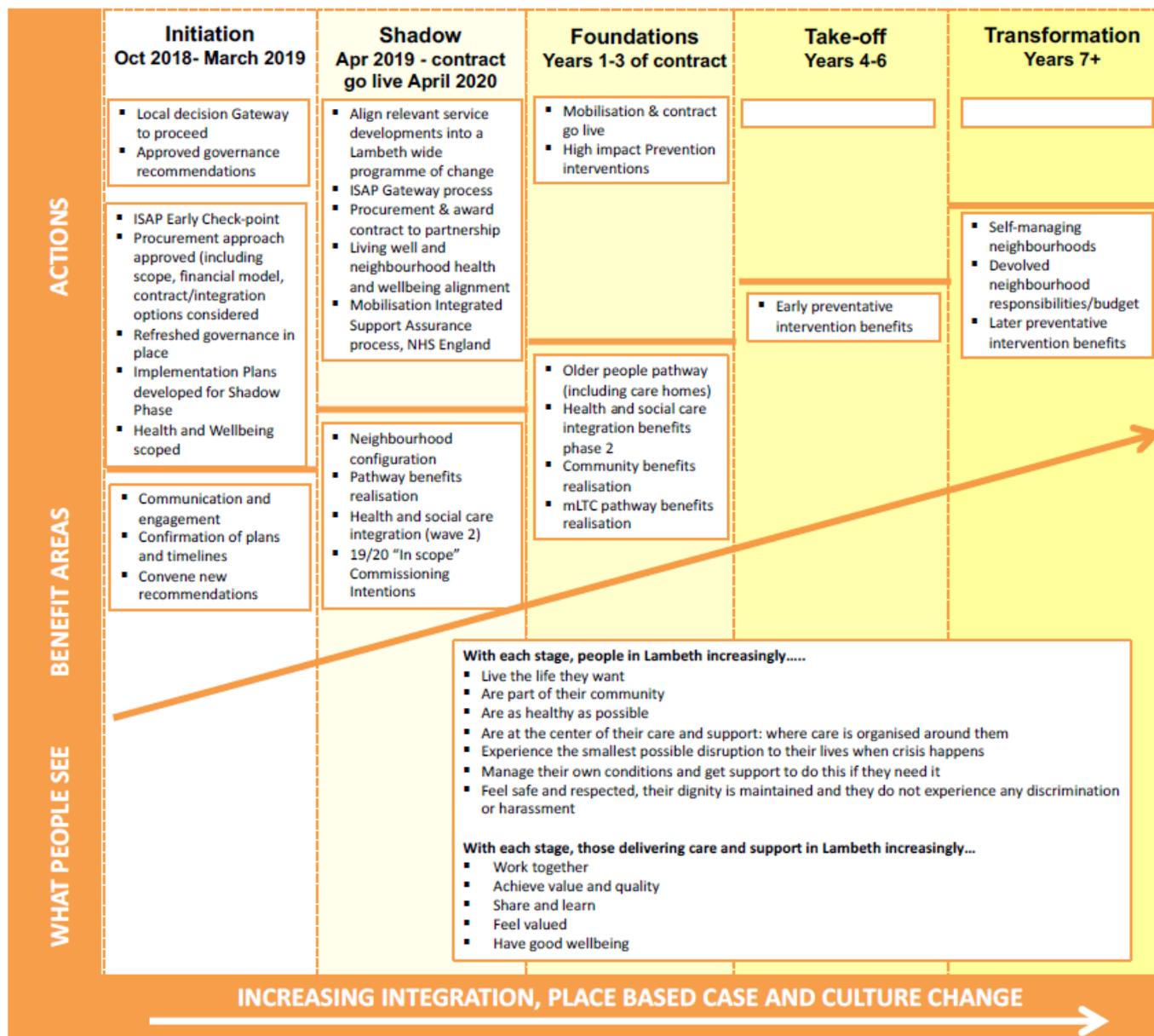
9. ORGANISATIONAL IMPLICATIONS

There are no direct organisational implications arising from the recommendations made in this report. The organisational implications will be considered as the proposals for the ongoing leadership of Lambeth Together, and the proposals for LCNs are developed.

Health

9.1 The purpose of integration is to improve the health and wellbeing of Lambeth people, by increasing value for money, better collaboration between a range of commissioners and providers of services and taking a more holistic approach to commissioning and providing health and social care.

10. TIMETABLE FOR IMPLEMENTATION



AUDIT TRAIL				
Consultation				
Name/Position	Lambeth directorate / department or partner	Date Sent	Date Received	Comments in paragraph:
Councillor Jacqui Dyer	Cabinet Member for Adults and Health	21.11.18	21.11.18	
Councillor Ed Davie	Cabinet Member for Adults and Health	21.11.18	21.11.18	
Fiona Connolly, Strategic Director	Adults and Health,	20.11.18	20.11.18	
Moira McGrath, Director	Integrated Commissioning	20.11.18	20.11.18	
Pete Hesketh, Finance	Corporate Resources	20.11.18	20.11.18	3.1-3.4
Andrew Pavlou,,Legal Services	Corporate Resources	26.11.18		
Wayne Chandai, Democratic Services	Corporate Resources	29.11.18	29.11.18	

REPORT HISTORY	
Original discussion with Cabinet Member	12.10.18
Report deadline	05.12.18
Date final report sent	04.12.18
Part II Exempt from Disclosure/confidential accompanying report?	No
Key decision report	3. Community Impact
Date first appeared on forward plan	14.09.2018
Key decision reasons	Non key
Background information	Our Children and Young People's Plan Lambeth Together Cabinet Paper 2017 LWNA Cabinet report March 2018
Appendices	Appendix A – <i>About Lambeth Together</i> Appendix B – <i>Re-imagining Local Care Networks: Neighbourhood Health and Wellbeing</i>