

23 January 2020		ITEM: 9
Health and Wellbeing Overview and Scrutiny Committee		
Thurrock Health and Social Care Transformation Prospectus		
Wards and communities affected: All	Key Decision: Non-key	
Report of: Les Billingham, Interim Director of Adult Social Care and Community Development		
Accountable Assistant Director: Les Billingham, Interim Director of Adult Social Care and Community Development		
Accountable Director: Roger Harris, Corporate Director of Adults, Housing and Health/Interim Director of Children's Services		
This report is Public		

Executive Summary

Thurrock Health and Social Care Transformation Prospectus provides us and our partners with the opportunity to set out our approach to transforming the Health and Social Care landscape. It summarises the steps we have taken since 2011, when the Adult Social Care-led inaugural approach known as 'Building Positive Futures' was established, followed in 2015 by the NHS-led approach 'For Thurrock in Thurrock' and culminating in the current integrated system redesign programme - **Better Care Together Thurrock**.

The Prospectus highlights all that we have achieved over the years, what we see as the key reasons for our success and the barriers we have overcome to ensure progression. Fundamentally, the paper articulates the building blocks of a 21st Century Health and Social Care system – one focused on people and place.

1. Recommendation(s)

1.1 That the Health and Wellbeing Overview and Scrutiny Committee endorse the Prospectus and the significant change to the health and care system in Thurrock delivered since 2011.

2. Introduction and Background

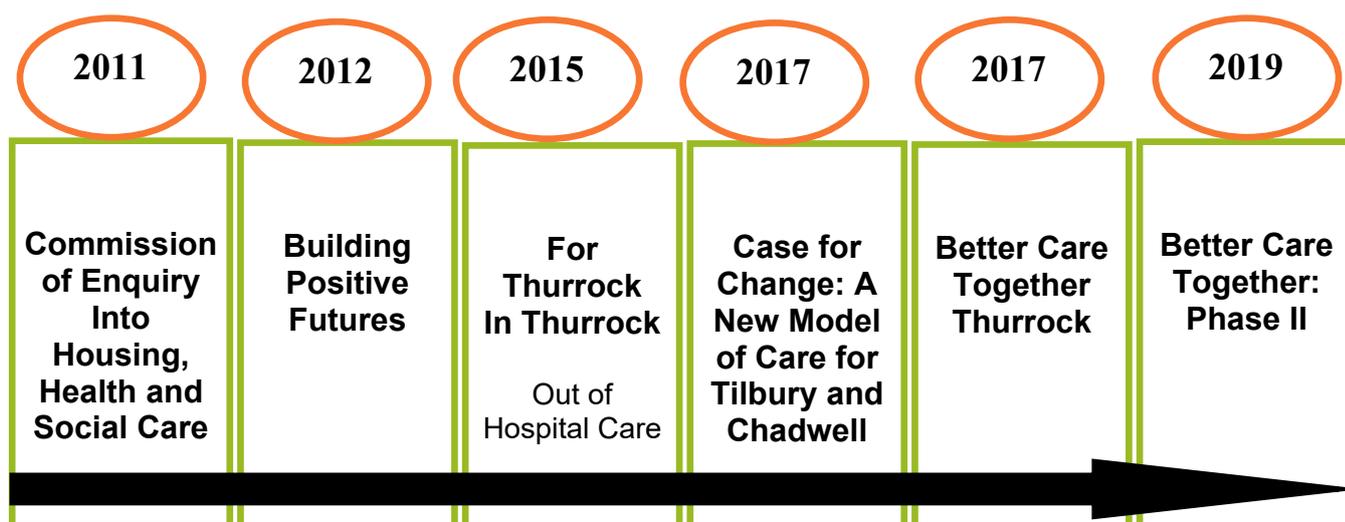
2.1 Thurrock is seen by its peers as being at the forefront of the change agenda for health and social care – identifying innovative and creative ways to manage the challenges faced by the system and the people that rely on it.

Accordingly, the Council receives numerous requests for both information and for visits from local authorities, in the main, who want to learn about our approach with a view of adopting elements of it. We receive regular requests to present and to run workshop sessions at regional and national events. Whilst sharing experiences is essential for enabling the development of health and care, until now we have had no one document to send out detailing the steps we have taken, what we have achieved, and what we have learnt.

- 2.2 In response to the interest in Thurrock’s approach and the opportunity to reflect on achievements and challenges made over the years, we have, in partnership with the NHS and Voluntary Sector developed a Prospectus. The Prospectus has received extremely positive feedback.

3. Issues, Options and Analysis of Options

- 3.1 The Prospectus details Thurrock’s Health and Social Care transformation journey starting in 2011 with the Commission of Enquiry into Housing, Health and Social Care, and concluding with the current phase of transformation known as ‘Better Care Together Thurrock’.



- 3.2 Early in our journey we identified that if we wanted to ensure people were able to live and maintain a ‘good life’ – including during the most difficult of times, then we needed to change the thinking behind the health and social care system. We needed to shift the system from being reactive and needs-led, to being preventative and outcome-focused. Fundamentally, we needed the system to be ‘human’.

- 3.3 Through our initial transformation programme Building Positive Futures, we understood that our ability to overcome the substantial challenges facing the sector and the wellbeing of people relying on the sector was broader than health and social care. It was also about the impact of the ‘Built Environment’ and the crucial role played and contribution made by communities and their

assets – leading to the establishment of Thurrock’s Stronger Communities Partnership.

- 3.4 Working in close partnership with Health and the Voluntary and Community Sector, the themes of ‘Stronger Communities’ and the ‘Built Environment’ have been a constant in shaping change. In addition, the final key element and constant of our transformation journey has been the creation an integrated health and care system focusing on people and place and on early intervention and prevention.
- 3.5 Working with communities, a set of principles were designed to inform and shape how we redesigned health and care in the Borough. We also identified what success was from the impact communities said they wanted to see from any change. This is essential to ensuring that the changes we make are for the right reasons and deliver the right results. In response to the principles and success factors, partners were able to agree and articulate a clear vision for the future ‘To provide better outcomes for individuals that are closer to home, holistic and that create efficiencies within the Health and Care system’.
- 3.6 Upon the development and launch of Better Care Together – which brought health and care partners together in articulating an integrated vision and plan for health and care – four clear work streams were identified:
 - Identification and management of long-term conditions;
 - Building capacity and capability in Primary Care;
 - Developing strong and resilient communities; and
 - Transforming community services.

Work streams were designed to shift the existing system towards early intervention and prevention and to focusing on delivering what mattered most to people – i.e. their version of a ‘good life’. This would assist with keeping people in their communities where this was appropriate - importantly with a good quality of life.

- 3.7 The learning gained from the earlier stages of work has enabled us to move a considerable way to achieving our goals. For example, strength-based social work teams (Community Led Support Teams) are being rolled out following a pilot in Tilbury and Chadwell, we are piloting two strength-based and self-managed Wellbeing Teams as a new approach to providing care in the home. We are also working closely with Health colleagues to redesign how Health services operate across Thurrock and continue to work closely with the Community and Voluntary Sector to build community resilience by using the strengths and assets that existing within communities and can be used as part of the health and care solution that people require. We have also managed to expand the role of technology as part of the care solution and have improved the capacity within Primary Care by introducing a mixed skills team.
- 3.8 We are constantly evaluating what we do – including working with the

University of Birmingham and London School of Economics. This helps us to learn from our approach – much of which is new and untested. We are also involved with a number of different networks – learning from other health and care systems in the same way they learn from us. One thing we have learnt is that change is constant and will continue to evolve. We want to ensure that the changes we make not only improve outcomes for individuals, but that they release practitioners from unnecessary bureaucracy and process to free them up to be able to spend quality time with communities and the people within them that require our help and support. The changes we have made have enabled practitioners to develop a different relationship with the communities they work within and a greater depth of knowledge allowing them the freedom and space to develop innovative and creative solutions.

- 3.9 Recognising that change is constant, we have already developed the next phase of health and care transformation, which is detailed within the Prospectus. This includes the constant review of and learning from new approaches – through a number of ‘test and learn’ pilots, and the design and implementation of a number of new pieces of work – this includes reviewing our approach to commissioning; the implementation of mental health redesign; and the redesign of community health.
- 3.10 Our Prospectus provides a record of our journey and this will be updated as we develop further and as we see the impact of change.

4. Reasons for Recommendation

- 4.1 The recommendation has been made to enable the Health and Wellbeing Overview and Scrutiny Committee to recognise the significant change achieved to Thurrock’s health and care system since 2011 and to reflect this within one key document which acts as a means of sharing Thurrock’s approach with peers and organisations representing the sector.

5. Consultation (including Overview and Scrutiny, if applicable)

- 5.1 The Prospectus has received input from and been agreed by Thurrock Integrated Care Alliance (TICA). The Prospectus has also been shared with and influenced by Thurrock’s User Partnership Boards – the development of the Prospectus being an objective for Adult Social Care during 2019.

6. Impact on corporate policies, priorities, performance and community impact

- 6.1 The Prospectus shows how Adult Social Care, Community Development and partners are contributing towards the Council’s ‘People’ priority.

7. Implications

7.1 Financial

Implications verified by: **Jo Freeman**
Finance Manager

Funding to support the work described in the body of the report has been allocated from a combination of the Adult Social Care precept, Improved Better Care Fund grant, social care government grants and transformation funding. The MTFS assumes the continuation of the already established work to support the integrated system redesign programme - Better Care Together Thurrock.

7.2 Legal

Implications verified by: **Courage Emovon**
Ag Strategic Lead / Deputy Head of Legal Services / Deputy Monitoring Officer

No direct legal implications have been identified and Legal Services is on hand to advise on any legal implications when identified. Changes made to the Health and Care system in Thurrock delivered since 2011 as expressly stated in the Thurrock Health and Social Care Transformation Prospectus is compliant and consistent with statutory requirements and obligations of the Council.

7.3 Diversity and Equality

Implications verified by: **Rebecca Lee**
Team Manager Community Development and Equalities

The Prospectus shows how the changes being delivered through the transformation of the health and care system are enabling people to achieve what matters to them regardless of their circumstances or where they are living. A focus on early intervention and prevention is essential to the ability to reduce health inequalities and the factors that influence health inequalities.

7.4 Other implications (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

None identified.

8. Background papers used in preparing the report (including their location on the Council's website or identification whether any are exempt or protected by copyright):

- None

9. Appendices to the report

Appendix 1 - Supporting a good life: Transforming Health and Social Care in Thurrock

Report Author:

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