

OPEN

Corporate Policy Committee

03 October 2024

The Cheshire East Health and Care 'Blueprint 2030' and Care Communities Operating Model

Report of: Helen Charlesworth-May

Report Reference No: CP/31/24-25

Ward(s) Affected: All

Purpose of Report

- 1 Over the last year, Officers from within the Local Authority have been working with colleagues from across the NHS and community and voluntary sector to draft the 'Blueprint 2030', a vision for health and care services in Cheshire East in 2030 (see Appendix 1). Alongside this an operating model for the eight Care Communities in the borough has been prepared (see Appendix 2); the Care Communities form the foundation stones of the new model reflected in the 'Blueprint 2030'.
- 2 This report summarises the 'Blueprint 2030' and the operating model and seeks the endorsement of these by the Committee. This will demonstrate the Council's commitment to working in partnership with the NHS and community and voluntary sector to achieve the vision of the 'Blueprint 2030' and to effectively operationalise the Care Communities.

Executive Summary

- 3 The Cheshire and Merseyside Health and Care Partnership consists of the nine local authority 'Places', the Integrated Care Board (NHS commissioners) and all NHS providers within the Cheshire and Merseyside geography. In each local authority area (or 'Place'), health and care partnerships have been formed to progress health and care service integration and improved outcomes for residents.

- 4 Cheshire East Council, NHS organisations and the community, voluntary, faith and social enterprise sector in Cheshire East, have been working together since 2018, to more effectively integrate services, establish seamless pathways of care, identify and protect our most vulnerable residents and support people to maintain good health and wellbeing.
- 5 The Place Health and Care Partnership Board Terms of Reference and associated health and care system governance arrangements were endorsed by the Council's Adults and Health Committee in July 2022.
- 6 The Cheshire East Joint Local Health and Wellbeing Strategy¹ was approved by the Cheshire East Health and Wellbeing Board in March 2023, setting out a vision 'To enable people to live a healthier longer life; with good mental and physical wellbeing; living independently and enjoying the place where they live'. The Strategy sets out a focus on:
 - Tackling inequalities
 - Prevention and early intervention
 - Person centred actions
 - Developing and delivering a sustainable, integrated health and care system
- 7 The 'Blueprint 2030' and the Care Communities operating model are key components of the aim to develop and deliver a sustainable, integrated health and care system.
- 8 The 'Blueprint 2030' sets out three core components of the 2030 health and care system. These are:
 - Healthy Households: Our ambition for the people of Cheshire East is to live well for longer, starting within the household, where empowered and health literate individuals and families use evidence-based information and digital solutions that are readily accessible to them, to make the best choices and to support good physical and mental wellbeing in their everyday lives irrespective of age or affordability.
 - Healthy Neighbourhoods: Our ambition is to support neighbourhoods to build an asset-based approach, where we help people to help themselves. We want people to live as part of a community, connected to the people who are important to them and able to benefit from a range of local, flexible, high-quality services and support to help them

¹ <https://www.cheshireeast.gov.uk/pdf/council-and-democracy/health-and-wellbeing-board/joint-health-wellbeing.pdf> The Strategy is that of the Council and the NHS Integrated Care Board.

live a good life together. This may require a radically different approach to how we work together as health and care organisations, the types of conversations we have and the willingness to distribute resources to local assets; for example our Voluntary Sector organisations are critical partners in developing healthy neighbourhoods.

- Health and Care Services: Our ambition is for people to be in receipt of local provision when they require health and/or care services, creating a shift from traditional centralised provision. In so doing we will place the empowered person central to their health and care system, facilitating responses to people's urgent and planned care needs by bringing services together where traditionally they have been disparate and seeing the whole person rather than an individual condition or need.

- 9 The Care Communities are geographically aligned, local teams of individuals drawn from general practice, community health, mental health, acute trusts, social care, Public Health, the VCSFE, local Healthwatch, optometry, dentistry, and community pharmacy to focus on the local population's health and well-being and their needs; helping people to stay in good health for longer (population health). They will be key to the 'Blueprint 2030' ambitions in relation to 'Healthy Neighbourhoods' and 'Health and Care Services'
- 10 The concept of the Care Community is to support people to be in good health and when needed, to arrange care, interventions and provide innovative personalised solutions. These solutions will be co-delivered and co-produced in partnership with the local community, drawing on local assets and engaging with services more widely than traditional health and care (eg local community organisations, housing, police, fire & rescue, schools). Working in partnership is the fundamental principle to delivering not only a successful Care Community but a community that cares. The Care Community is a "team of teams" based on a registered population footprint.
- 11 The 'Blueprint 2030' and the work of the Care Communities will, in the longer term, contribute to a clinically and financially sustainable health and care system. A key aspiration of the 'Healthy Households' and 'Healthy Neighbourhoods' is a focus upon empowerment, early intervention and prevention, with the aim of reducing demand over time as the population becomes healthier and people are supported to live independently at home for longer.
- 12 The Council's Transformation Programme is similarly focussed upon creating a sustainable organisation with reduced demand. A Target Operating Model will be defined, which will consider the relationship

between residents and the Council and provide a clear strategy for the transformation plan to be formed around. It will have a focus upon the demand management within Adult and Children's services and the alignment of these programmes will be important where it is sensible and helpful to do so.

RECOMMENDATIONS

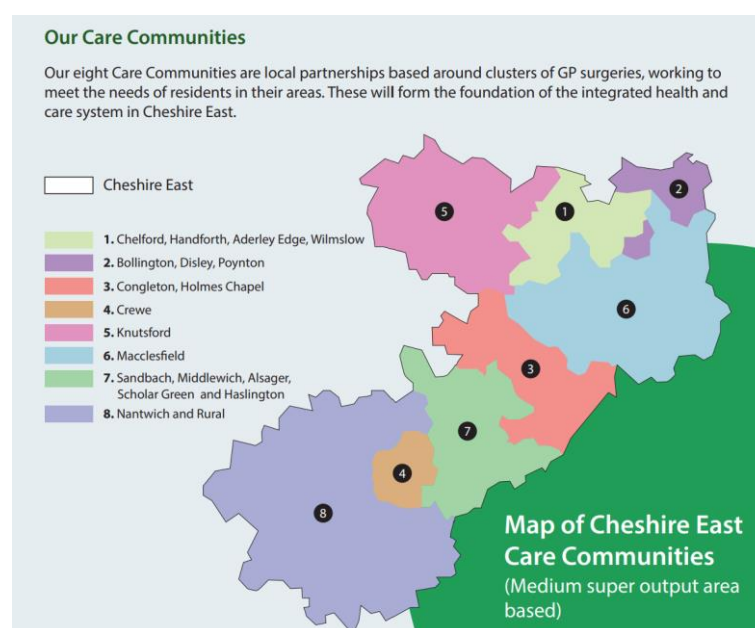
The Corporate Policy Committee is recommended to:

1. Endorse the Cheshire East Health and Care 'Blueprint 2030' and the continued involvement of officers to work on its implementation.
2. Endorse the Care Communities Operating Model and the continued involvement of officers in the work of the Care Communities.
3. Delegate to the S151 Officer alongside the Executive Director, Adult Social Care, Health and Integration, the consideration of and, if deemed appropriate by them, the decision to allocate existing resources to the Place Partnership Board for deployment within the Care Communities.

Background

- 13 There have been several steps made towards more integrated health and care services over the last eleven years. The Health and Social Care Act 2012 initiated the work and the Council worked closely with the Clinical Commissioning Groups (CCGs), GPs and our local Acute Hospital and Mental Health Trusts to progress integration in Cheshire East, including being an NHS England Integration 'Pioneer' 2015-2017. The Health and Care Act 2022 saw the demise of the CCGs and the establishment of the NHS Integrated Care Board. Since July 2022 we have been working within this new context.
- 14 The Adults and Health Committee endorsed the Terms of Reference of the Place Health and Care Partnership Board and the health and care system governance arrangements on 18th July 2022 [Decision report template \(cheshireeast.gov.uk\)](#) Three Councillors, the Executive Directors of Adults, Health and Integration and Children and Families and the Director of Public Health are members of the Partnership Board.
- 15 The Joint Local Health and Wellbeing Strategy (March 2023) took account of the changes within the NHS and set a refreshed vision and way forward with outcomes and deliverables described.

- 16 With the publication of the Strategy, it was recognised that we needed to set out what has become known as the 'Blueprint 2030' – a description of how things would be in 2030 if we achieved the outcomes in the Strategy. This would not only help visualise the future, but also allow the system and organisations within it to ensure that decisions made now and over the next few years, were moving us towards the 2030 vision. Over a period of six months, four multi-agency workshops were held to draft and agree the 'Blueprint 2030'; and to then test our population patient segments against it to ensure they aligned.
- 17 Appendix 1 summarises the 'Blueprint 2030', sets out a contextual narrative and the next steps.
- 18 At the same time as the 'Blueprint 2030' has been worked upon, the fledgling Care Communities have been evolving and working within their individual geographies and together, to determine how they can contribute to the system vision and deliver more joined up and effective care to their local populations.



- 19 The preparation of the Care Communities operating model creates a formal statement of intent and agreement on how they will work going forward. Appendix 2 sets out more detail about the work of the Care Communities and the proposed arrangements to embed them as a critical part of the Cheshire East health and care system.
- 20 As a key partner in that health and care system, local authority officers have been proactively involved in both the development of the 'Blueprint 2030' and the work of the Care Communities. It will be important to continue this, to bring influence to bear on the ongoing work. There are concerns that the Care Communities are too clinically focussed, but it is

only by engaging with them that we can influence their approach and ensure it is effectively aligned with the work of Adult Social Care, Public Health, the Communities team, Children and Families and other Council services.

- 21 Similarly, Officers will work together across services to align wherever necessary with the Council's transformation programme and target operating model. The common desired outcomes are a financially sustainable 'system', viable and sustainable organisations, reduced demand on health and care services and improved health and wellbeing for our residents. The Director of Transformation has initiated conversations with the Integrated Care Board Director of Cheshire East Place to facilitate this.
- 22 The Cheshire East Health and Care Partnership Board and Place Leadership Group have agreed both documents and recommended that individual partner organisations now consider and endorse them.

Consultation and Engagement

- 23 A number of different organisations have been involved in the drafting and finalisation of the 'Blueprint 2030'. These are set out in Appendix A. Similarly, many of the same organisations have been involved in the setting up and running of the Care Communities and the drafting of the operating model.
- 24 A multiagency Communications and Engagement group has been formed (chaired by the Council's Head of Communications). They are working on plans to share the 'Blueprint 2030' with the health and care workforce and residents.
- 25 Each Care Community is working on its local communications and engagement plans to ensure that the local communities are aware of the work and have the opportunity to consider and comment upon the local plans.

Reasons for Recommendations

- 26 The 'Blueprint 2030' and the Care Communities operating model are key documents that will underpin future work to develop and deliver a sustainable, integrated health and care system. As a significant partner in the development of the Joint Local Health and Wellbeing Strategy and the planning, commissioning and delivery of health and care services, the local authority's endorsement of the documents demonstrates an ongoing commitment to working with partners on this important agenda.

27 The recommendations link to the Council’s Corporate Plan 2021-2025 ‘Fair’ aim and these priorities:

- Work together with residents and partners to support people and communities to be strong and resilient.
- Reduce health inequalities across the borough.
- Protect and support our communities and safeguard children, adults at risk and families from abuse, neglect and exploitation.
- Reduce the reliance on long term care by improving services closer to home and providing more extra care facilities, including dementia services.

Other Options Considered

28 The alternative option to the recommendations is for the local authority to not sign up to the ‘Blueprint 2030’ and the Care Communities operating model. This would hamper the work to develop and deliver a sustainable, integrated health and care system and damage relationships and trust with our NHS partners.

Option	Impact	Risk
Do nothing	The Local Authority would not be signed up to the ‘Blueprint 2030’ and the Care Community operating model, hampering the work to integrate and build a sustainable health and care system. Relationships with NHS partners would be damaged. Council Officers would have limited ability to influence the work of these NHS partners in Cheshire East.	Reputational risk Financial risk Negative impacts on patients/people receiving care as less joint working across the NHS and Council teams supporting them.

Implications and Comments

Monitoring Officer/Legal

- 29 Under S65Z6 Health & Care Act 2022 a local authority can arrange for functions to be discharged by a Joint Committee, and the joint committee can receive funding. In the case of Cheshire East Council, the Place Partnership Committee was set up to be a joint committee of the Integrated Care Board (ICB) at 'Place' level. The ICB have not yet delegated any of their funds to the Place Partnership Board.

Section 151 Officer/Finance

- 30 As set out above, the aspiration to establish a sustainable, integrated health and care system is at the heart of the Joint Local Health and Wellbeing Strategy and the 'Blueprint'. The intention of the work is to reduce system costs, through reducing demand, improved collaboration, increased effectiveness and efficiency.
- 31 There are no direct impacts on the MTFs in the short to medium term. It is intended that by 2030 system finances will be balanced.
- 32 It should be noted that the Care Communities operating model does require organisations to agree to share or allocate resources to the Care Communities in due course (see Appendix 2 page 10 'Budgetary responsibility and alignment of financial drivers'). Initially these will be NHS resources.
- 33 As the Care Communities develop there is likely to be a need to include Council resources through the Place Health and Care Partnership Board (joint committee). The Executive Director of Adults, Health and Integration could decide to transfer resources to the Board for allocation to Care Communities, where this would deliver the Council's desired outcomes and provide best value. This aligns with the Board's Terms of Reference and the governance arrangements previously agreed by the Adults and health Committee in July 2022.
- 34 Any transfer of resources to the Board will be fully contained within the appropriate governance arrangements (for example, a S75 agreement similar to that governing the existing Better Care Fund) which will clearly outline the limit of the council's financial exposure and the level of risk being faced.

Policy

35 The report supports the aspirations of the Cheshire and Merseyside Health and Care Partnership Strategy² and the Cheshire East Joint Local Health and Wellbeing Strategy as well as the Cheshire East Corporate Plan.

An open and enabling organisation	A council which empowers and cares about people	A thriving and sustainable place
	<p>Work together with residents and partners to support people and communities to be strong and resilient.</p> <p>Reduce health inequalities across the borough.</p> <p>Protect and support our communities and safeguard children, adults at risk and families from abuse, neglect and exploitation.</p> <p>Reduce the reliance on long term care by improving services closer to home and providing more extra care facilities, including dementia services.</p>	<p>A great place for people to live, work and visit</p>

Equality, Diversity and Inclusion

36 There are no specific equality implications of this report and its recommendations/decisions here. As service changes are proposed moving forward, then the appropriate Equality Impact Assessments will be completed.

Human Resources

37 There are no specific human resources issues relating to this report. Senior officers from the Adults, Health and Integration Directorate have been involved in the work to prepare the 'Blueprint 2030'. Officers from

² [cheshire-merseyside-draft-interim-hcp-strategy-2023.pdf](https://www.cheshireandmerseyside.nhs.uk/sites/default/files/2023-03/cheshire-merseyside-draft-interim-hcp-strategy-2023.pdf) (cheshireandmerseyside.nhs.uk)

Communities, Public Health and Adult Social Care are in attendance at Care Community meetings and working with them on different initiatives. Officer time and capacity is therefore being invested in Care Communities.

Risk Management

38 Risks in relation to this report fall into three categories:

- Financial: a failure to work with and engage in the work of the NHS organisations in Cheshire East and the Care Communities undermines our efforts to establish a financially sustainable and integrated health and care system.
- Reputational: There are expectations in Government that local authorities will work with NHS partners to establish integrated health and care systems. A failure to do so will potentially impact upon the reputation of the local authority nationally as well as with local partners.
- Population outcomes: Not working in partnership with health and care organisations increases the risk of care being less joined up and poorer outcomes for patients and clients.

Rural Communities

39 The 'Blueprint 2030' covers services across all parts of the borough and many of the Care Communities cover significant rural geographies. The intention of the work is to reduce the need to travel to acute hospitals and to see more services delivered in the community. This would benefit rural communities who can (mostly) access their local primary care/community health services more easily than the hospitals.

Children and Young People including Cared for Children, care leavers and Children with special educational needs and disabilities (SEND)

40 The 'Blueprint 2030' and the Care Communities cover health and care services for people of all ages, including children and young people. The Family Hubs are developing relationships with their respective Care Communities.

Public Health

41 The achievement of the 'Blueprint 2030' and the work of the Care Communities should see a positive impact on the health and wellbeing of Cheshire residents. The 'Blueprint 2030' vision is 'whole system' recognising that good health and wellbeing is the result of far more than

access to health and care services. With its emphasis on healthy households and healthy neighbourhoods, as well as access to services it incorporates the wider determinants or building blocks of health and wellbeing.

Climate Change

- 42 There are no specific impacts upon the council’s carbon footprint and achieving environmental sustainability from this report. All partners that are signed up to the Blue Print 2030 have their own organisational ‘Green’ plans and there may be opportunities to collaborate on initiatives in the future.
- 43 Promoting healthy lifestyles is very much a part of the ambitions of the ‘Blueprint 2030’ through the Healthy Household and Healthy Neighbourhood themes. This will include supporting active travel initiatives which can have beneficial environmental impacts. Similarly if service provision is being offered more locally, then active travel may be a more realistic travel option.

Access to Information	
Contact Officer:	Guy Kilminster, Corporate Manager Health Improvement Guy.kilminster@cheshireeast.gov.uk
Appendices:	Appendix One – The Cheshire East System Blueprint 2030 Appendix Two – The Care Communities Operating Model
Background Papers:	Health and social care integration: joining up care for people, places and populations - GOV.UK (www.gov.uk) Health and Care Act 2022 (legislation.gov.uk) Get in on the Act: Health and Care Act 2022 Local Government Association