Report title: Neighbourhoods Programme Board Assurance Report

Report to: HMR Locality Board

Date of meeting: 29 August 2023

Cabinet Portfolio Holder: Councillor Daalat Ali Deputy Leaders and Cabinet Member of Health

Report of: Sandra Croasdale Associate Director of Integrated Systems Development

Public or private: Public

Key Issue: No

Published on the Forward Plan: No

1.   Points of Escalation & Any decisions required

1.1   No points of escalation this reporting period

1.2   This paper provides an update on progress against the delivery of the neighbourhood programme and sets out key risks to delivery

1.3   The following recommendations were agreed at the LCO Board in August 2023, full details of which can be found in appendix 1:

- To support the strategic direction of travel for neighbourhoods

- To ensure that learning from the engagement sessions is carried forward into the ongoing development of our neighbourhoods' model.

- To note the plan to further develop the neighbourhood data packs, acknowledging the risk around Strategic Intelligence capacity.

- To note the progress to date re the development of leadership groups

- To continue to specifically support further engagement with Primary Care Networks in Rochdale North and South neighbourhoods to develop the neighbourhood's leadership groups.

- To note progress on geographical alignment

- To note progress in reviewing option for INT Provision to Whitworth

- To note the progress around co-location of 5 out of 6 INTs acknowledging the risk re Pennine

2.   Key Risks

2.1   The neighbourhoods programme has a full risk register to support delivery. The following risks are escalated to the board.

Area of Risk	Risk Description	Mitigating Actions	Actions to Mitigate
Pennines INT	IF there is no plan for a defined estates timeline for co-location for Pennines INT Team THEN status quo remains and full integration is compromised and does not follow the model for neighbourhoods	1. No estate is identified to bring both teams together at present. 2. Attending huddles via Teams on a daily basis.	1. Development of Strategic Estates Plan
Canalside Primary Care Network practices (2) outside of township alignment	IF there is no formal link made between the two GP practices in the Canalside PCN which are located in the Middleton Neighbourhood and the Middleton Neighbourhood Board THEN the services and developments within the neighbourhood may not be known to these practices as an offer to their residents who are eligible due to residency in Middleton	1. Primary care and Neighbourhoods team are working with the PCNs and practices and Neighbourhood board to facilitate agreed links and effective communication to ensure all residents of Middleton are aware of services available to them.	1. Identify suitable representative from Canalside PCN to attend Middleton Group 2. Primary Care team member for Middleton attending Middleton Neighbourhood Group 3. To ensure that the Middleton Neighbourhood Group incorporate this risk within their meetings. 4. Produce an assurance plan to include communication to the two practices and residents on development in Middleton Township 5. Meeting taking place with two Middleton Practices
Rochdale South	IF there is no engagement to develop the neighbourhood or no commitment from The Bridge PCN and Canalside PCN to work collaboratively in the Rochdale South neighbourhood THEN residents in Rochdale South may suffer inequalities in relation to accessing services.	1. Discussions with PCN CDs from both PCNs are ongoing 2. Discussion with Canalside PCN board taken place 3. Discussion with The Bridge PCN board scheduled to take place	
Development of Rochdale	IF there is no commitment from the Rochdale North PCN to develop the Rochdale	1. Conversations taking place between Rochdale North PCN and Director lead	1. Complete matrix template

North Neighbourhood	North neighbourhood THEN this could result in the development of inequalities for residents		2. Director lead to try and arrange meetings with each GP practice.
System Intelligence Team (SIT) capacity to support LCO Business Plan	IF we are unable to develop local intelligence as a result of the GM directive THEN we will not be able to meet the needs of the LCO Business Plan, which will affect delivery.	1. Central Locality Performance Framework for localities to use for Performance Reports – 60% complete – GM with DQ checks taking place. Not yet available for use. Workarounds currently in place in locality 2. Delivery of Central BI products for use in Localities. Local BI asked not to develop as we move to central BI products that the local team will use for insight, interpretation, mobilisation. These will be for UEC, Planned Care, Mental Health, Primary Care, Cancer, Performance 3. BI team are currently supporting these delivery workstreams in GM with other staff across localities 4. BI also continue to support locality MDTs with information until the new products are available 5. Matt Hennessey from GM leading on DII Function shared a communication to place leads and localities explaining the situation around GM, BI, Data warehousing and dashboards development	1. Understand what milestones/ schemes cannot be delivered without support from the System Intelligence Team 2. GM to provide a directive on what they are happy for us to do locally and what work is to be completed by pan GM.

3. Areas of outstanding practice and innovation

Areas of good practice and impact on our Rochdale residents will be presented to Locality Board at the meeting.

4. Any other highlights

4.1 Full details on progress to date can be found within appendix 1

Background Papers: Appendix 1 – LCO Board Neighbourhood Update – 16 August 2023

Contact: Sandra Croasdale Associate Director for Integrated Systems Development, scroasdale@nhs.net

Report to One Rochdale Health Care Board (LCO Board)

Date of Meeting:	16 August 2023
Agenda Item:	xx
Subject:	Neighbourhoods Quarterly Update
Reporting Officer:	Sandra Croasdale (report prepared by Louise Entwistle)
Aim of the Paper:	1. Provide an update on the progress of the neighbourhood programme 2. Seek approval of the recommendations in section 2
Purpose:	Decision & Information

Approval & Sign off	
Contents reviewed and approved by:	Sandra Croasdale
Clinical Content signed off by:	
Financial content signed off by:	
Governance Route:	

Neighbourhoods Programme

1. Executive Summary

1.1 The neighbourhood's programme is fundamental to our locality operating model and successful implementation of this programme will provide the best opportunity to reduce inequalities for the residents of Heywood, Middleton and Rochdale (HMR).

1.2 The last report presented to LCO Board in February 2022 streamlined the 11 original recommendations in the neighbourhood's programme into 3 key workstreams:

- Workstream 1: Strategic Direction for Neighbourhoods

- Workstream 2: Neighbourhood Leadership Group development and priority setting

- Workstream 3: Geographical alignment to Townships, operational delivery integration and transformation.

1.3 This report provides and update on each of these workstreams highlighting any associated risk and detailing the next steps and recommendations.

1.4 The neighbourhoods programme has a full risk register to support delivery. The following risks are escalated to the board.

Table 1 – Escalated Risks

Area of Risk	Risk Description	Mitigating Actions	Actions to Mitigate
Pennines INT	IF there is no plan for a defined estates timeline for co-location for Pennines INT Team THEN status quo remains and full integration is compromised and does not follow the model for neighbourhoods	1. No estate is identified to bring both teams together at present. 2. Attending huddles via Teams on a daily basis.	1. Development of Strategic Estates Plan
Canalside Primary Care Network practices (2) outside of township alignment	IF there is no formal link made between the two GP practices in the Canalside PCN which are located in the Middleton Neighbourhood and the Middleton Neighbourhood Board THEN the services and developments within the neighbourhood may not be known to these practices as an offer to their residents who are eligible due to residency in Middleton	1. Primary care and Neighbourhoods team are working with the PCNs and practices and Neighbourhood board to facilitate agreed links and effective communication to ensure all residents of Middleton are aware of services available to them.	1. Identify suitable representative from Canalside PCN to attend Middleton Group 2. Primary Care team member for Middleton attending Middleton Neighbourhood Group 3. To ensure that the Middleton Neighbourhood Group incorporate this risk within their meetings. 4. Produce an assurance plan to include communication to the two practices and residents on development in Middleton Township 5. Meeting taking place with two Middleton Practices
Rochdale South	IF there is no engagement to develop the neighbourhood or no commitment from The Bridge PCN and Canalside PCN to work collaboratively in the Rochdale South neighbourhood THEN	1. Discussions with PCN CDs from both PCNs are ongoing 2. Discussion with Canalside PCN board taken place 3. Discussion with The Bridge PCN board scheduled to take place	

	residents in Rochdale South may suffer inequalities in relation to accessing services.		
Development of Rochdale North Neighbourhood	IF there is no commitment from the Rochdale North PCN to develop the Rochdale North neighbourhood THEN this could result in the development of inequalities for residents	1. Conversations taking place between Rochdale North PCN and Director lead	1. Complete matrix template 2. Director lead to try and arrange meetings with each GP practice.
System Intelligence Team (SIT) capacity to support LCO Business Plan	IF we are unable to develop local intelligence as a result of the GM directive THEN we will not be able to meet the needs of the LCO Business Plan, which will affect delivery.	1. Central Locality Performance Framework for localities to use for Performance Reports – 60% complete – GM with DQ checks taking place. Not yet available for use. Workarounds currently in place in locality 2. Delivery of Central BI products for use in Localities. Local BI asked not to develop as we move to central BI products that the local team will use for insight, interpretation, mobilisation. These will be for UEC, Planned Care, Mental Health, Primary Care, Cancer, Performance 3. BI team are currently supporting these delivery workstreams in GM with other staff across localities 4. BI also continue to support locality MDTs with information until the new products are available 5. Matt Hennessey from GM leading on DII Function shared a communication to place leads and localities explaining the situation around GM, BI, Data warehousing and dashboards development	1. Understand what milestones/ schemes cannot be delivered without support from the System Intelligence Team 2. GM to provide a directive on what they are happy for us to do locally and what work is to be completed by pan GM.

2. Recommendations

Detailed recommendations are set out in each workstream update in the report. A summary of recommendations is provided below:

- To support the strategic direction of travel for neighbourhoods

- To ensure that learning from the engagement sessions is carried forward into the ongoing development of our neighbourhoods' model.

- To note the plan to further develop the neighbourhood data packs, acknowledging the risk around Strategic Intelligence capacity.

- To note the progress to date re the development of leadership groups

- To continue to specifically support further engagement with Primary Care Networks in Rochdale North and South neighbourhoods to develop the neighbourhood's leadership groups.

- To note progress on geographical alignment

- To note progress in reviewing option for INT Provision to Whitworth

- To note the progress around co-location of 5 out of 6 INTs acknowledging the risk re Pennine

3. Key Information

This section provides an update on each of the 3 workstreams including progress to date, risks, next steps and recommendations.

3.1. WORKSTREAM 1 – Strategic Direction

3.1.1 Strategic Alignment of Neighbourhoods

The neighbourhoods programme referenced in this paper, in the main, refers to a health and care neighbourhood approach. However, it is recognised that if we are to collectively really impact on reducing health inequalities for the population of Rochdale, the neighbourhood model must ensure alignment and collaboration across health, care, education, community safety, housing and all other wider determinants of health.

In the same way that progress is being made in health and care neighbourhoods, there is equally positive work happening across different parts of the system that are all focussed around a neighbourhood approach and have similar aims. For example:

- Family Hubs are now live. Their aim is to build on families' strengths, drawing on and improving relationships, including building networks with peers to address underlying issues. This will be achieved by harnessing the power of networks to drive progress on joining up professionals, services and providers (state, private, voluntary and community) through co-location, integration, partnerships, data sharing, shared outcomes and governance.

- Community Safety / Greater Manchester Police who aim to continue to support children, young people, families and communities by continuing to work together, taking a whole system approach.

There is a lack of join up at national level across these different areas. Each has a different set of requirements that must be delivered and each with different accountabilities and funding flows. It is unsurprising therefore that what results is pockets of great neighbourhood working across the system. Each of these "pockets" are having an impact for our population but also have a pull on resources, both financial and people, and if not aligned and working collaboratively could lead to real complexity of services.

To this end a system wide workshop is being planned for the autumn which will seek to gain support for this wider system approach and agree how to take this forward.

It is important that whilst we consider how to take this strategic work forward, we do not lose momentum in the further development of the health and care model. To this end a meeting for each of the 5 neighbourhoods is being planned which will bring together political, clinical and professional leaders from across the system in each neighbourhood. The aim is to set this strategic context of the wider neighbourhood approach, embed the agreed political leadership in health and care neighbourhoods and support ongoing development and gain traction in North and South Rochdale neighbourhoods.

RECOMMENDATIONS

- To support the strategic direction of travel for neighbourhoods

NEXT STEPS

- Meeting in each neighbourhood including political, clinical and professional leaders from across the wider system

- Neighbourhoods workshop to be held in early autumn with system wide engagement.

3.1.2 Communications & Engagement bids

As reported within the last paper there were three funded neighbourhood projects to support neighbourhood development. These projects have now been completed and have provided reports on their finding and outcomes. Each organisation was asked to present their reports to the neighbourhood's programme board in July 2023, where they were well received. The highlights from each report are listed below. The full reports have previously been reported to both LCO Board and Locality Board.

Heywood, Middleton and Rochdale Circle

Aim

- To hold active focus groups and 1-2-1 sessions across the neighbourhoods, which are reflective of the local demography.

- Co-create and design a system for local people to have their say and feel heard about neighbourhood model.

Highlights

- Joint working with other recognised organisations (Rochdale Hornets Foundation and Rochdale Football Club Foundation) aided in the diversity of who the project was able to engage with.

- Utilisation of existing events to engage allowed for a better response and cross section of representatives of the area.

- A common theme through all the engagement sessions/ platforms was around the 'big' things that affect resident lives, the delivery of basis service needs, with access to GP appointments being the most mentioned concern.

- Development of a co-designed 'best practice' system for interacting on a practice, inclusive an influential level with the neighbourhood boards, including avenues for challenge and commendation, alongside processes for follow up discussions and feedback on how information, issues and dialogue has been used.

Creative Health

Aims

- Engage with Rochdale's diverse communities to examine how to set up/ structure boards to enhance local healthcare service.

- Identify key issues in the neighbourhoods.

- Establish mechanism for local people to interact with neighbourhood boards.

- Provide people a voice, choice, and influence over local development of the integrated neighbourhoods.

Highlights

- The communities involved want to see and be a part of change but also feel heard when they are asked to consult or engage, they would like feedback on what has /can /can't be done following consultation/ engagement.

- Framing the conversations as community rather than 'your experience' engaged people more and brought out broader range of topics and conversations.

- Participant were interested in how boards would decide priorities and then feedback to the community.

- Overall consensus was the boards should be made up of professionals and existing community leaders rather than residents,

- Transport came up as the most discussed topic around cost and service transformation along with accessing healthcare appointments.

- Through these sessions and issues disclosed, referrals to a multiple service's were made.

Rochdale Councils of Mosques

Aim

- Involve a number of individuals to provide an opportunity to have a voice and influence neighbourhood decisions focusing on health inequalities.

Highlights

- Utilise a breadth of medias to promote engagement events, including trust and/or respected community figures, to ensure a cross section of the local community attended.

- Clear and varied opportunities to connect with the neighbourhood leadership groups, where issue, concerns, suggestions can be raised.

- Access to appointments and appropriate services in a convenient and timely manner.

- Awareness raising of what is available in the local community and what these services can support.

Learning from engagement events

Learning from this work led to a discussion around how best to conduct future engagement sessions. The following were considered important:

- Ensure there is an opportunity for any issues to be raised and that everyone can be heard.
- Focus on 1 or 2 key points or questions and try and be specific
- Keep it simple and use the right language to engage.
- People want to influence the system but not necessarily be part of the system. They are keen that trusted groups or organisations should be involved and represent their views.

RECOMMENDATIONS

- To ensure that learning from the engagement sessions is carried forward into the ongoing development of our neighbourhoods' model.

NEXT STEPS

- Utilise the findings to aid discussions at the Neighbourhoods workshop planned for Early Autumn.

3.1.3 Data & Intelligence

Neighbourhood intelligence continues to be key to the development of neighbourhoods and the neighbourhood's strategy.

The neighbourhood's data packs are being used to support discussions around the priorities for the Neighbourhood Leadership Groups in Heywood, Middleton and Pennines and members of the

business intelligence team have attended meetings to explain what the packs show. They have also been shared with wider services who are reporting that the content is valuable to their areas of work.

The data packs are being updated with the latest Census data and should be completed in within quarter 3 2023/34.

The LCO has engaged with both the Local Authority strategic housing team and Rochdale Boroughwide housing, both of which have presented to LCO SMT and will now attend regularly. Through these discussions it was agreed that housing data would be included in the neighbourhood packs. This work is ongoing.

Other areas which could be included in the packs have been suggested including:

- Early years (e.g., A&E attendance, low birth weight, School readiness)

- Women and Children (e.g., Pre-birth smoking, Breastfeeding, Premature births)

- Family and Social Environment (e.g., Children in low-income families, referrals to children's services)

These suggestions will need to be scoped and agreed.

RISK: Timescales for the completion of this work are not clear due to the risk around the Strategic Intelligence Team capacity. *"IF we are unable to develop local intelligence as a result of the GM directive THEN we will not be able to meet the needs of the LCO Business Plan, which will affect delivery."* Mitigations for this risk are outlined in table 1.

RECOMMENDATIONS

- To note the plan to further develop the neighbourhood data packs, acknowledging the risk around Strategic Intelligence capacity.

NEXT STEPS

- The Strategic Intelligence Team (SIT) continue to develop the neighbourhood packs as additional data is identified.

- Include the Health and Wellbeing priorities data within the neighbourhood packs

3.2 WORKSTREAM 2 – Neighbourhood Leaderships Groups

3.2.1 Leadership Group Establishment

Our neighbourhood programme identified the need for leadership groups to be established in neighbourhoods. Early version of these groups are now operating in Heywood, Middleton and Pennines.

As outlined in the last report to LCO Board Councillors have now been identified in each neighbourhood and initial engagement has taken place to introduce the concept of the neighbourhood model and agree the role of the councillors as part of the leadership group.

In addition, director leads were agreed to play a facilitative role and support the ongoing development of the neighbourhood. Currently director leads are linked with the leadership groups in Heywood, Middleton and Pennines and local councillors have been engaged in Heywood.

As detailed within the workstream one update further discussions will take place including local councillors to put the wider context of the neighbourhood's strategic direction prior to them being involved in leadership groups.

Discussions have continued with PCN CD's in both Rochdale North and Rochdale South neighbourhood's, supported by the Associate Medical Director. However, progress has been slow and leadership groups are yet to be established.

The following risks have been identified for Rochdale South and Rochdale North which will need to be mitigated to enable further progression with primary care. However, one of the aims of the neighbourhood meeting with wider system partners, as set out in workstream one, is to try and gain traction for the development of the neighbourhood model in these two areas.

RISKS

Area of Risk	Risk Description	Mitigating Actions	Actions to Mitigate
Rochdale South	IF there is no engagement to develop the neighbourhood or no commitment from The Bridge PCN and Canalside PCN to work collaboratively in the Rochdale South neighbourhood THEN residents in Rochdale South may suffer inequalities in relation to accessing services.	1. Discussions with PCN CDs from both PCNs are ongoing 2. Discussion with Canalside PCN board taken place 3. Discussion with The Bridge PCN board scheduled to take place	
Development of Rochdale North Neighbourhood	IF there is no commitment from the Rochdale North PCN to develop the Rochdale North neighbourhood THEN this could result in the development of inequalities for residents	1. Conversations taking place between Rochdale North PCN and Director lead	1. Complete matrix template 2. Director lead to try and arrange meetings with each GP practice.

In order to support the ongoing development of the leadership groups, a maturity matrix has been developed and agreed through the neighbourhood's programme board (appendix 1). This is in the process of being completed with the 3 established leadership groups and will clearly identify the next steps for each group.

Heywood leadership group have started to establish their local priorities focusing on cardiovascular disease and hypertension. They held a Healthy Heywood day at the local Morrisons supermarket, which involved a variety of partner organisations. Residents could have their blood pressure and blood

sugars checked and they looked for signs of hypertension. Advice, guidance, and some referrals for further conversations with GPs were made.

Pennines Partnership have identified diabetes as one of their priority areas and have identify actions to support the development of this work. Further discussions will take place following the neighbourhoods meeting, set out in workstream one to establish additional priority areas.

RECOMMENDATIONS

- To note the progress to date re the development of leadership groups

- To continue to specifically support further engagement with Primary Care Networks in Rochdale North and South neighbourhoods to develop the neighbourhood's leadership groups.

NEXT STEPS

- Develop approach for establishment of Rochdale North and South leadership groups

- All neighbourhoods to complete maturity matrix to support next steps.

3.3 **WORKSTREAM 3 – Geographical Alignment to Townships, operational delivery integration and transformation**

3.3.1 Geographical Alignment

The last report provided a review of the staged roll out of the realignment of services to the five neighbourhood boundaries, this has progressed significantly since. The original 6 Integrated Neighbourhood Teams (INTs), which include Adult Social Care and Adult Community Health Teams, have now been realigned to the 5 Neighbourhoods. Workload and capacity within the new arrangements are being monitored on a regular basis, with some neighbourhoods having considerably high caseloads.

Rochdale North and Rochdale South INT Teams are now co-located at Spotland Bridge Mill, since June 23 and feedback is positive. This demonstrates that there is significant level of integration between community health and social care.

Co-location of the Pennines INT team has not been possible to date due to suitable estates accommodation not being available. Further work continues via the Strategic Estates Group to identify suitable options, but additional digital technology has been put in place to allow greater joint working in their current locations.

RISK

Area of Risk	Risk Description	Mitigating Actions	Actions to Mitigate
Pennines INT	IF there is no plan for a defined estates timeline for co-location for	1. No estate is identified to bring both	1. Development of Strategic Estates Plan

| | Pennines INT Team THEN status quo remains and full integration is compromised and does not follow the model for neighbourhoods | teams together at present.

2. Attending huddles via Teams on a daily basis. | |
|---|---|---|---|

The Children's Integrated Health teams realigned to the 5 neighbourhood boundaries in May 23, and the realignment of caseloads and capacity is being monitored.

The Children's Family hubs are in the process of realigning from 4 teams to 5 in line with the neighbourhood model. They are in the process of realigning caseloads and team members, and this is planned to be completed by September 2023.

Mental Health – Living Well Team model has been piloting in Heywood since June 23 and this has been a great success and are looking to roll out across the other neighbourhoods in stages. There will be 6 Living Well teams as they are aligned to the Primary Care Networks, rather than the 5 neighbourhoods.

Following a presentation at LCO SMT, strategic housing and Rochdale Borough Housing Trust are looking to align to the 5 neighbourhoods. Further discussions are required to understand progress and timescales.

Initial conversations have taken place with Childrens Services around alignment to the neighbourhoods.

RECOMMENDATIONS

- To note progress on geographical alignment

NEXT STEPS

- Review INT and Childrens Integrated Health workloads and capacity at 6 months post alignment.

- Support role out of the Living Well model across the other neighbourhoods.

- Develop action plan to include timescale, for strategic housing and Rochdale Borough Housing Trust.

- Further conversations with Childrens Services to embed into the neighbourhood's model and identify representation at the neighbourhood's delivery group.

3.3.2 Whitworth

Community Health Services for Whitworth, which sits outside of the Rochdale Borough boundaries, are currently commissioned by East Lancashire ICB and provided by Northern Care Alliance NHS

Foundation Trust. This service has been provided for a number of years to the residents of Whitworth by the now Rochdale North INT. This is challenging from a neighbourhood delivery perspective and therefore a review of the service was seen as a priority.

In the last report to LCO Board it was highlighted that a brief outline paper was presented to the neighbourhood's programme board in December. The report acknowledged that discussions had taken place with commissioners and finance leads to realise any impact on residents and to services because of the reconfigurations of the INT teams, alongside equity of access to services, impact on provision of services and any financial implications.

Further meetings have taken place with East Lancashire ICB and a decision has been made to consider only the commissioned adult community health services in the first instance. Finance colleagues from East Lancashire ICB and Greater Manchester ICB – HMR locality are currently reviewing the contract to establish current financial situation and implications should adult community health service be removed.

Additional data was requested by East Lancashire ICB around current service provision and number of patients being supported. A request at the last meeting was for senior operational colleagues to meet to understand the caseloads and for East Lancashire ICB to consult with Whitworth Medical Practice on current adult community service provision.

RECOMMENDATION

- To note progress in reviewing options for INT provision to Whitworth

NEXT STEPS

- Further discussions with East Lancashire ICB following contract review, discussion with GP Practice and senior operational staff.

- Develop full options appraisal.

3.3.3 Estates

The last report highlighted that Pennines neighbourhood was a key concern as accommodation space is limited. Options for the location of the Pennine INT team to be co-located at Littleborough Medical Centre have been explored and have been deemed unsuitable due to lack of ventilation and natural lighting in the space available. There are currently no other options available, and this is noted on the risk register (Pennine INT Estates)

Development of an HMR Estates strategy is in progress. A mapping exercise is underway to establish the estates we have across HMR for each service, including their condition and utilisation. The initial finding will be presented at the Strategic Estates Group (SEG) in September as part of a workshop focused on neighbourhood estates.

The potential development opportunity at Hare Hill site in Littleborough is being explored with intrusive site investigation on the land being undertaken to establish the suitability of the site. Development of the site would form part of long-term accommodation requirement for Pennines.

The old Littleborough Primary school building is being redeveloped into a family hub with services to include children's services, children's integrated health including clinical space, midwives, and youth services.

RISK

Area of Risk	Risk Description	Mitigating Actions	Actions to Mitigate
Pennines INT	IF there is no plan for a defined estates timeline for co-location for Pennines INT Team THEN status quo remains and full integration is compromised and does not follow the model for neighbourhoods	1. No estate is identified to bring both teams together at present. 2. Attending huddles via Teams on a daily basis.	1. Development of Strategic Estates Plan

RECOMMENDATIONS

- To note the progress around co-location of 5 out of 6 INTs acknowledging the risk re Pennines

NEXT STEPS

- SEG workshop to review initial mapping work, provide critical eye and discuss options for approach to estates.

- Complete full mapping exercise of HMR estates.

- Review findings report for the Hare Hill site and plan next steps.

3.3.4 Data Sharing (Information Governance) and Information Technology (IT)

The data capture work undertaken by neighbourhood's services in May 22, highlighted there were several issues around IT that were causing tasks to take longer or not possible in some locations. A review of the IT issues is underway to establish if the fix provided has resolved issues. Meetings are taking place with team leads.

A few services had experienced issues with the GM Care Record, this has been resolved with new log ins and additional training. Additional functions have been added to the GM Care Record including Care plans for several different conditions or needs, which going forward will allow a more joined up approach.

ORCHA (Organisation for the Review of Care and Health Apps) assesses care and health apps and digital health products to see if it meets 5 main requirements (Data and privacy, professional assurance and clinical safety, usability and accessibility, interoperability, technical security and stability). The

website allows professionals to recommend apps to support patients and for the public to access apps to support their health and wellbeing.

The professional service has been promoted to community services and GP practices, with training provided for those require it. There have been GP practices that have utilised the function to send bulk text messages to patients including specific medical conditions i.e., CVD, promoting the website and apps that will enable them to manage their condition. This has seen an increase in website traffic and app downloads, after two practices sent text messages to patients in May 2023 the number of apps downloaded increased by 137.5% based on the average for the previous 6 months.

RECOMMENDATION

- To note progress

NEXT STEPS

- Finalise review of IT issues and take to the IT and Information Governance (ITIG) meeting

- Complete a plan on a page for IT

4. Next Steps

Next steps for each of the workstreams are detailed within the body of this report.

An assurance report will be submitted to Locality Board on 29 August 2023.

Further updates on the neighbourhood programme will be submitted to LCO board quarterly.

5. Appendices

Appendix 1: Leadership Group Maturity Matrix

Appendix 1 – Leadership Group Maturity Matrix

Components of a neighbourhoods		Heywood	Middleton	Pennines	Rochdale North	Rochdale South
Partners engaged and supporting the development of the neighbourhoods model	Councillors Identified and agreed					
	Engaged PCN CD/GP Lead					
	Engaged PCN (wider)					
	Additional Comments					
Early Leadership Group established with appropriate representation	Councillor					
	Primary Care rep					
	Integrated Neighbourhood Team - Health rep					
	INT ASC rep					
	Mental Health rep					
	Children's rep					
	VCFSE rep					
	Action Together rep					
	Additional Comments					
Leadership Group Governance	Chair/Co-Chair identified					
	Role of membership clearly defined					
	Terms of Reference approved					
	Leadership Priority actions agreed					
	Admin support					
	Links to Townships agreed					
	Links to Townships operating					
	Link to Prevention Network agreed					
	Link to Prevention Network operating					
	Link with Insight and Engagement group agreed					
	Engagement group operating (yearly reporting)					
	Cooperative engagement toolkit embedded					
	Shared learning opportunities established					
	Additional Comments					
VCFSE Development in neighbourhoods approach	Prevention Network established and operating					
	Anchor organisation involvement identified					
	Anchor organisation involvement engaged					
	Anchor organisation involvement rep attending					
	Community mapping process agreed					
	Community mapping process completed					
	Additional Comments					
Data and Information	Neighbourhood packs known about and shared in leadership					
	Neighbourhood packs understood and utilised in leadership group to support action					
	Financial opportunities mapping					
	Additional Comments					