



City of Westminster



THE ROYAL BOROUGH OF
KENSINGTON
AND CHELSEA

Westminster & Royal Borough of Kensington and Chelsea Health & Wellbeing Board

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Title:	Health and Well Being Strategy – Outcomes Framework and Integrated Neighbourhood Teams
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Wards Involved:	All
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1. Executive Summary

- 1.1 The aim of the Health and Wellbeing Strategy (HWBS) has been to set out the medium to long-term ambitions for health and wellbeing across Kensington and Chelsea and Westminster and to provide a mechanism for the Health and Wellbeing Board (HWBB) to track progress. Although it will be hard to identify the direct impact on the health of our communities, the strategy provides a context to promote cultural change, mutual accountability, shared understanding and collaborative working¹.
- 1.2 By reflecting the needs of local populations, the strategy also helps harness local resources, through shared ownership and leader to tackle health

¹ <https://www.gov.uk/government/publications/shared-outcomes-toolkit-for-integrated-care-systems>

inequalities. The report is therefore intended to be a way for the HWBB to understand how the board can operate over the coming years to inform and influence the wider social determinants.

- 1.3 Not everything will be within the direct control of the HWBB members, therefore the metrics (Appendix A) provide a basis by which the HWBB can understand impact and to understand areas where their shared leadership can be used to improve these outcomes across the 10 Ambitions. This will be supported by the development of an annual implementation plan that needs to be developed with HWBB members and the community. Appendix B outlines the approach to developing and agreeing the plan.
- 1.4 The development of Integrated Neighbourhood Teams (INTs) is a key platform that seeks to change the way partners work across organisations and with communities to improve population health. This work follows the ambitions of the HWB Strategy and takes forward national recommendations outlined in the Fuller Stocktake Report (2022).

2. Recommendations

- 2.1 The HWBB to comment on the draft outcomes, implementation plan development process and note the update on Integrated Neighbourhood Teams.

3. Background

“Shared outcomes have proved to be a powerful means of bringing organisations together across the health and social care system to deliver on a common purpose. Where outcomes are agreed at place, they can enable organisations to address the needs of their local populations with a focus on health improvement – while also reinforcing shared efforts to meet national outcomes and requirements”²

- 3.1 Following the adoption of the HWBS a “basket” of key metrics (Appendix A) are proposed as the basis for the joint HWBB to monitor progress and to support identification of areas where the HWBB wants to focus its effort. The metrics are based on what are already publicly available, and in a number of areas report to different boards. However, they are seen as key indicators that allows the HWBB to understand how, working across all ambition areas, it can assess the impact it is making on health inequalities. The indicators will change over time as local priorities depending on progress.
- 3.3 The aim of the implementation plan (see appendix B) is to identify local actions, against each of the 10 ambitions and are seen as key in starting to have an impact on health inequalities. It will cover a 2-year period and has picked up from the issues raised through the consultation and also links key existing work priorities across HWBB partners. Where the HWBB is responsible for the delivery of the action, this will be delegated to a led organisation, for example Place Based Partnership, local authority, or VCS etc.

² <https://www.gov.uk/government/publications/shared-outcomes-toolkit-for-integrated-care-systems>

3.5 The implementation plan is not a fixed document. As delivery proceeds it will be reviewed on a quarterly basis and if areas need strengthening or new actions required, then these will be captured.

4. Integrated Neighbourhood Teams

4.1 Integrated Neighbourhood Teams (INT) are the delivery vehicle (see appendix C) through which the ambitions within the HWBS will be implemented over the coming years. This programme of work will bring together local partners and services across health, social care and community groups to support better health and wellbeing in our neighbourhoods and reduce health inequalities for our residents.

4.2 Through the INTs, partners will strengthen prevention and early intervention care by working together better in neighbourhoods and actively using population health information insights to drive their work. This will enable care professionals to improve how we support our increasingly complex residents through more effective integrated working across our health, care and local communities. This is important as we know that partners can only effectively address the social determinants of health that have a causal effect on our resident's health and wellbeing, if we improve our close working with our active local communities.

4.3 The development to date has focused on engaging and co-producing with partners across the Bi-Borough a draft INT framework to inform our joint understanding of what INTs should be and what they should support. The co-design also included interviews and surveys with residents as well as those delivering services. Personas that provided examples of real-life challenges that people can face were developed and also used in workshop discussions to inform the development of this framework. In addition, development of the framework involved identifying areas of best practice both within and across the Bi-Borough to support discussions. This ensures that we continue to build on the many successful existing models of integration (e.g. Family Hubs) as an opportunity to learn and share good working practices.

4.4 Across WCC and RBKC, there will be a total of 3 INTs each of which will be led by an INT Leadership teams made up of health, care and community sector representation. These INTs are:

- North Kensington & Chelsea and Queen's Park & Paddington – with initial focus on supporting people 65yrs and over, including Mental Health needs
- South Kensington & Chelsea – supporting children and young people, including through family hubs, and development of community connectors programme
- Westminster – supporting people 65yrs and over, and Octopus community connectors programme

4.5 Each INT will use a data-led population health management approach in order to identify as key INT representatives what the local population challenges are and to collectively design and deliver a localised support offer that improves the outcomes for people facing those challenges. hyper-local delivery which is

reflective of population need. We have started with the priorities above, which in time will move to other locally agreed areas of focus.

- 4.6 A Bi-Borough INT Steering Group of senior executive leads from all of the partner organisations involved has also been established, and will oversee the development and delivery by the INTs. This group in turn reports into the Bi-Borough Collaboration Delivery Group for strategy and steer which is overseen by the HWBB.
- 4.7 An overview of Bi-Borough INT development can be found within Appendix C.

5. Financial Considerations

- 5.1 None.

6. Legal Considerations

- 6.1 The Health and Wellbeing Board has a statutory duty to prepare a joint health and wellbeing strategy under s116A of The Local Government and Public Involvement in Health Act 2007.

END

Appendix A

Draft shared outcomes frameworks



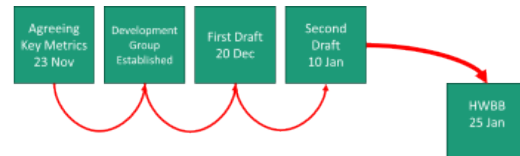
Appendix B

Draft Implementation Planning Process

Implementation Plan Development



1. Establishing a HWBB led development group
2. Working with community led organisations to develop the key priorities and focus
3. Recommending to the HWBB the focus of the implementation plan, for example
 - INT roll out (Ambition 7)
 - CYP - (Ambition 1)
 - VCS commissioning- (Ambition 5)
 - Early detection- immunisation, screening, smoking etc (Ambition 2)
4. Mapping the existing strategic and operational partnerships to identify existing actions and to identify areas of responsibility and reporting
5. Continue to work with the HWBB on its role and approach to deliver and be accountable for the HWB strategy



Appendix C

Bi-Borough Integrated Neighbourhood Team Development Overview