

# **North Tyneside's Commissioning Intentions 2021 / 2022**

## **North Tyneside Health and Wellbeing Board**

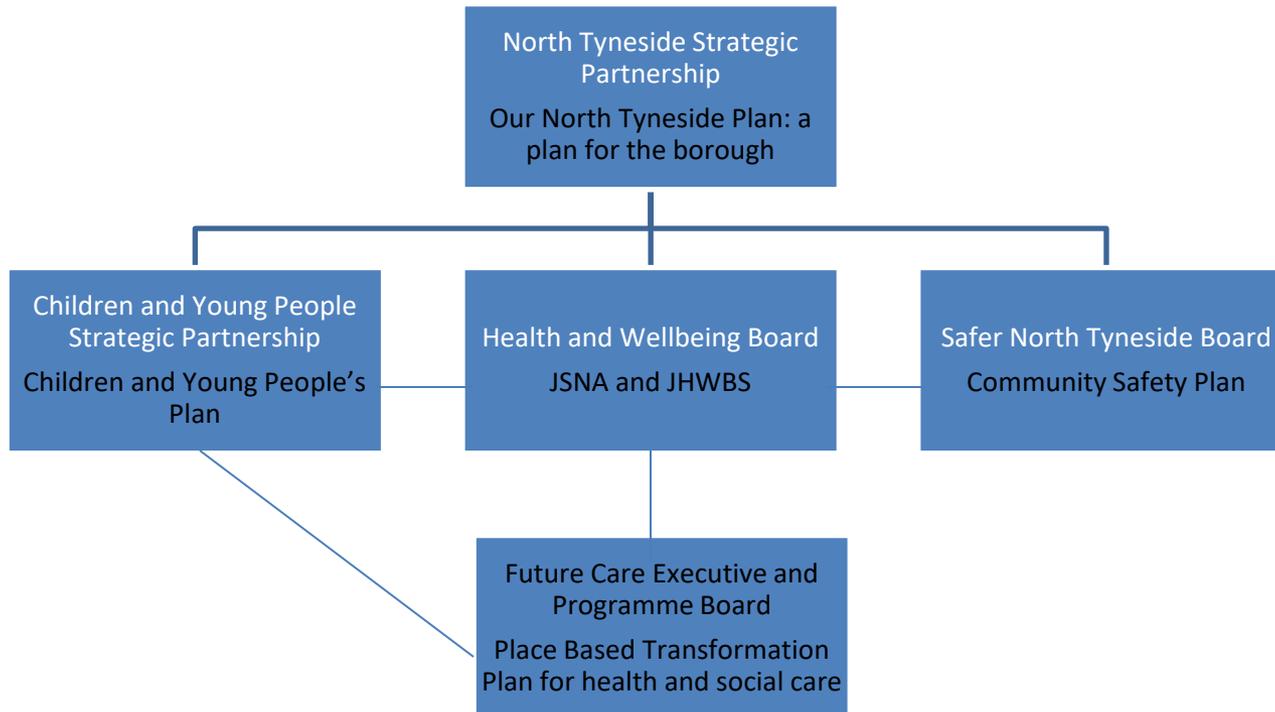
**March 2021**

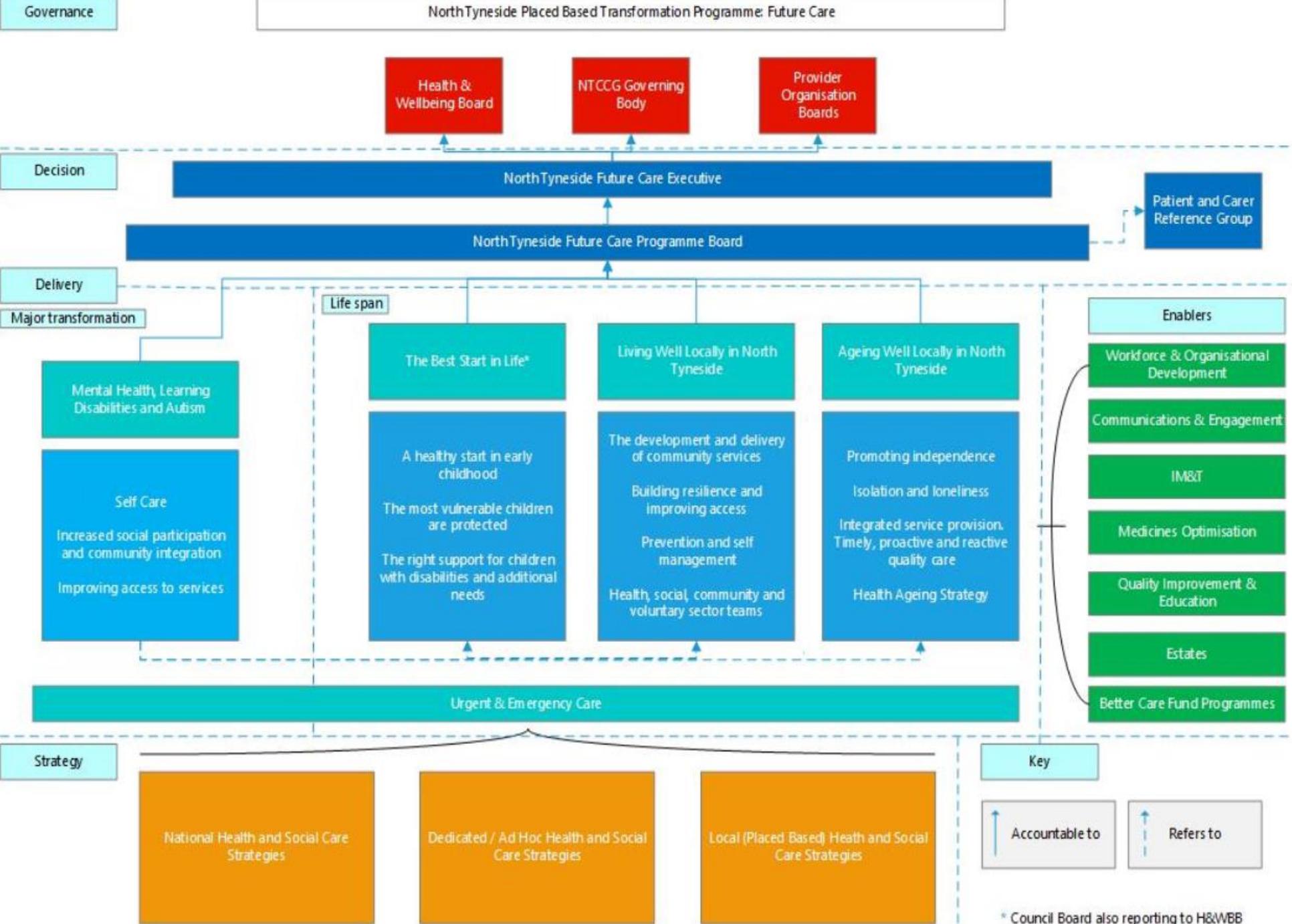


# Introduction

- **Commissioning intentions:**
- Must be shared with the HWBB
- Reflect the Joint Strategic Needs Assessment (JSNA) and Joint Health and Wellbeing Strategy (JHWBS)
- Underpin the Children and Young People's Plan and the North Tyneside Place Based Transformation Plan
- Contribute to the delivery of the wider plan for the borough 'Our North Tyneside Plan'
- **Our journey:**
  - Try to avoid duplication with Scrutiny functions
  - Work together to demonstrate the synergy between different commissioners
  - Try to make it interesting!

# Governance Structures





\* Council Board also reporting to H&WBB

# Children and Young People



# Children and Young People's Plan - Vision and Outcomes Framework

**“Making North Tyneside an even greater place for children and young people to thrive; where all, including those who are vulnerable, disadvantaged or disabled, are ready for school, ready for work and life, cared for and supported.”**

## THE FIVE I'S



**I AM  
SAFE**

FREE FROM  
HARM AND  
ABUSE



**I AM  
HEALTHY**

CHOOSING  
HEALTHIER  
LIFESTYLES



**I HAVE  
OPPORTUNITIES**

LIVING THE  
LIFE I WANT



**I HAVE  
A VOICE**

AN ACTIVE  
CITIZEN WITH  
INFLUENCE



**I AM  
HAPPY**

RESILIENT AND  
ENJOYING LIFE

# Commissioning intentions – Children & Young People

- **Maternity Services** – implement Better Birth expectations; roll out saving Babies Lives Care Bundle in maternity units; provide postnatal physiotherapy and multidisciplinary pelvic health clinics all in line with NHS Long Term Plan
- **Children’s Public Health Services** - review and develop the 5-19 element, produce a breast feeding strategy, evaluate the pilot of the smoking in pregnancy service and consider options for commissioning the service;
- **Early Years and Childcare** – support the market to ensure a sustainable COVID recovery and respond to the changing childcare needs of children and families;
- **Children’s Mental Health and Emotional Wellbeing** – continue the Barnardo’s Strategic Alliance, repeat the school based mental health survey carried out two years ago, pilot a Recovery School/College, deliver Mental Health First Aid Training in schools, pilot a specialist sleep service; continue collaboration between CAMHS and Early Help through creation of an Early Help post and additional children’s wellbeing practitioners

# Children & Young People cont

- **Special Educational Needs and Disability (SEND)** – deliver the new Inclusion Strategy, support schools/children with COVID recovery phase and catch-up programmes, strengthen the short break offer for disabled children.
- **Paediatric Care** – review the pathways for paediatric short stay services to ensure that children and young people are receiving the appropriate level of care in the right place.
- **Young Carers** – develop and implement a young carers needs assessment pathway. Identify a young carers lead in North Tyneside schools
- **Integrated Sexual Health Service** – re-procure based upon refreshed needs assessment
- **Domestic Abuse Services** – undertake a domestic violence needs assessment in readiness for new DA Act and to inform re-procurement of DA services
- **Tackling Inequality and Poverty** – including the Poverty Intervention Fund and DfE Holiday Activities Fund;

# Working Age Adults

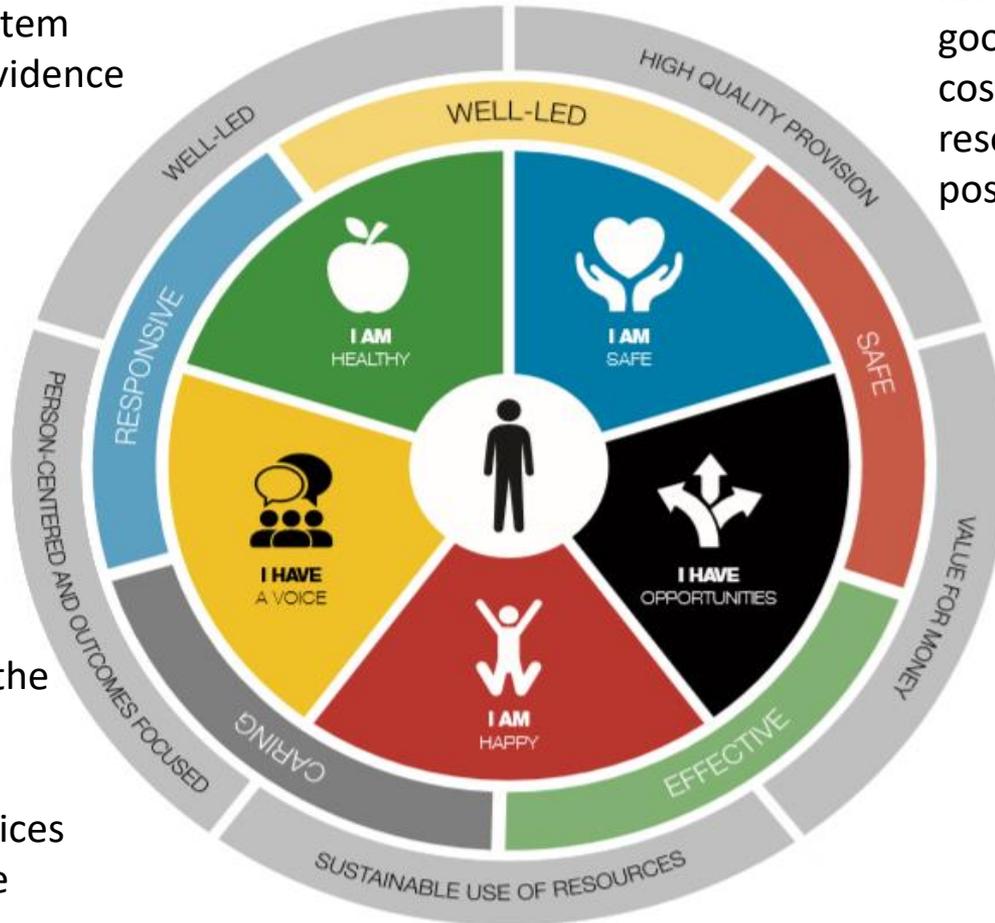


# Outcomes focussed commissioning

*We commission in order to achieve outcomes for our customers based on knowing their needs, wants, aspirations and experience*

We take a whole system approach and use evidence about what works.

We work with the market to identify solutions that ensure a good balance of quality and cost; to make the best use of resources and achieve the most positive outcomes for people.



We place the person at the centre; focusing on outcomes that are important to them. Services we commission promote health and wellbeing.

We have a diverse and sustainable market.

# Commissioning intentions – working age adults

- **Stop smoking** – commission specialist stop smoking service through the Community Pharmacy Federation;
- **Fresh and balance** – contribute to review of this service.
- **Supporting independence** – support for carers, use and development of assistive technology to compliment paid provision;
- **Supported accommodation** – procurement of new service for under and over 25's to reduce homelessness, focus on those with chaotic lifestyles;
- **Primary Care** – support primary care networks to make best use of additional roles funding; development of community MDTs; implement NHS Long Term Plan requirements re: access to primary care; social prescribing
- **Community Health Care** - Review current community service provision; implementing community and primary care health integration, working with range of service providers, Primary Care Networks and community and voluntary sector
- **Autism strategy and pathway** – development of a multi-agency whole life autism strategy for North Tyneside;

# Commissioning intentions – working age adults cont.

- **Transforming care** – ensure there is sufficient care, support and housing provision to support those people with a learning disability / autism coming out of long stay hospital;
- **Structured diabetes education** - Pilot the development of a structured education programme for people who have type 2 diabetes and a learning disability
- **Drug and alcohol** – plan developed for additional funding to support people, hard to reach groups, those not accessing support, assertive outreach model;
- **Community Mental Health Services for People with Serious Mental Illness** - Implementation of national strategy, localised to North Tyneside to reconfigure community mental health provision for adults with serious mental illness
- **Forensic services / pathway** – review of forensic pathways and services in the community to free up capacity and support hospital discharge;
- **Psychological Pathway Review** - Review the psychological pathway across mental health services including health psychology, community treatment teams and specialist psychological therapies to evidence impact, identify gaps and possible duplication

# Older People



## OUR APPROACH



Healthy

Active

Connected

### Integrated

- Health and social care services
- Digital systems
- Workforce, contracting, commissioning, and monitoring
- Transition between working age, frailty and palliative care services

### Person centred

- Shared decision making and realistic medicine central to all care decisions
- Focus on 'what matters to me'
- Co-production commitment to involve carers, users and professionals in reviewing and developing services

### Safe

- Services
- Housing
- Environment
- Awareness of safeguarding vulnerable groups

### Inclusive

- Services are accessible to all including those with physical disability, learning disability or autism
- Better co-ordinated care across systems
- Referrals may be redirected but are not rejected

# Commissioning intentions – older people

- **Being Active** - Support older people in North Tyneside to be active, eat well, stop smoking reduce alcohol intake and live well. Includes initiatives such as HowFit campaign, Diabetes Prevention Programme, development of the Goal seeker app
- **Extra care services** – put in place new contracts and arrangements for existing extra care services. Work with market to develop additional extra care provision across the borough, including dementia specific services;
- **Day services** – review provision and requirement, feed into new contracts and services;
- **Residential and nursing care** – review demand and requirements for care home provision, commercial arrangements and feed into procurement exercise; improve IT infrastructure and connectivity in care homes; maximise the use of NEWS in care homes which supports early recognition of people whose health is deteriorating; commission Advance Care Practitioners to be employed in nursing homes
- **Integrated Frailty Unit** - Continue work to develop the integrated frailty unit incorporating a range of services

# Commissioning intentions – older people

- **Integrated Care** – continue multi–agency work to roll out integrated frailty services for older people in North Tyneside including: enhanced care in care homes; development of single patient record and clinical system; integration of the Falls Service into single point of access system and frailty service
- **Urgent & Emergency Care** - Work with partners to ensure capacity and responsiveness of primary and community urgent care services to prevent unnecessary admission to hospital
- **Support for people from hospital** – homes first model to support people going home with reablement support and / or via intermediate care route. Reduce and minimise the numbers going directly to care homes from hospital, unless they are returning residents;
- **Crisis Services** - Development of older peoples mental health crisis services
- **Cancer** - Continue to support the North East Cancer Alliance and services to implement Rapid Diagnostic Centres that will improve access to cancer testing for our residents; review early lung cancer case finding pilot in Wallsend and potentially roll out across North Tyneside
- **Palliative Care** - Explore integration opportunities for palliative care services to deliver the End of Life strategy and collaborate on joint initiatives amongst partners

# Covid-19



# COVID-19 April to September 2021

- **Test and Trace** - Develop local model of test and trace
- **Community Testing** - Expand provision of community testing
- **Community Champions** - Extend Community Champions programme
- **High Risk Settings** - Continue focus on high risk settings particularly care homes
- **COVID-19 Vaccinations** - continue the roll-out of the COVID-19 vaccination programme in North Tyneside so that all eligible adults are offered a vaccination within national timescales. Includes developing strategies to address vaccination inequalities and reduce / minimise hesitancy.
- **Long Covid Rehabilitation** - Implement long covid rehabilitation services to manage long term effects of covid-19 on peoples mental and physical health
- **Pulse Oximetry@Home** - Review impact of Pulse Oximetry@Home service aimed at helping to detect silent hypoxia to reduce mortality and morbidity as a result of contracting the covid-19 virus
- **Care Homes** – supporting safe visiting to care homes

# Covid-19

- **Inequalities** - Assess the impact of COVID-19 on inequalities across the borough, including developing North Tyneside response to health inequalities based on the nationally set 8 health inequalities domains. Also includes assessment of impact of covid-19 on carers in relation to both their own needs and managing the needs of the person/people they are caring for.
- **Voluntary Sector** – agree continued use of the CCG grants to voluntary sector organisations to provide innovative solutions to meeting needs during/as a result of the pandemic
- **Digital Exclusion** - Continue research work on digital exclusion in North Tyneside and review findings of research work to inform how digital exclusion will be reduced/eliminated
- **COVID-19 recovery** - Work with providers, their workforce and the wider market on recovery from COVID-19 aiming to build on innovative ways to access services implemented during the pandemic and improve access to services; reduce waiting lists and waiting times which have lengthened during the pandemic

# What we have heard



# Key themes

- **Access to information** - People have told us about the challenge of getting up-to-date, accurate and trusted information about local health and care services. The pandemic highlighted this gap, but it has also emerged through our thematic work. The Living Well North Tyneside Partnership should address this.
- **Access to care** – The pandemic necessitated a monumental shift in how people access health and care services and we have been gathering feedback about people’s experiences and are working with the CCG and Primary Care Networks to understand what has worked well and could be continued into the future. Transport continues to be an issue.
- **Digital inclusion** – With significant shift of services into virtual and online delivery, we have heard about people’s challenges of accessing services online including: knowledge/skills, kit, data connectivity and credit.
- **Communication and coordination** – People have told us about feeling detached from the care of their loved ones and limited access to information, particularly with hospital/care home visiting restricted.
- **Inequality** – Starting to hear about different experiences for people who can afford to pay for support when public services were not available.

# Issues

- **Vaccinations** - Supporting access to information about the vaccination programme. Actively gathering feedback - generally very positive. Expectations appear to be growing. National programme vs local delivery programmes.
- **Pharmacy and medication** – Understanding people’s experiences of getting prescriptions and accessing the medication.
- **Maternity and child health** – We heard from 140 people about their experiences during the pandemic and sharing feedback and issues with providers and commissioners.
- **Waiting for treatment** – Understand people’s experiences of waiting for treatment – people not coming forward and where services have delayed treatment.
- **Carers** – Isolation, absorbing responsibilities, fatigue, not known to services.
- **Care Homes** – Communications with friends/family and visiting.
- **Mental health**- awareness of increased anxiety, isolation and loss of control. Bereavement support is also highlighted.