

TITLE OF REPORT: **Locality Working – Update and Next Steps**

REPORT OF: **Colin Huntington, Strategic Director, Housing, Environment and Healthy Communities**

Purpose of the report

1. This report provides an update on the locality working model which includes the alignment of the emerging Family Hub model within the broader Locality Working approach.
 - To support this activity this report outlines a work programme that will:
 - o Align the Family Hub model to the broader locality model to support the “whole family / all age” approach
 - o Align the activity closely with VCS partners that will support/ develop or commission the community development approach
 - o Implement a locality-based case management approach within the Early Help Service and develop a programme to embed the links with Housing services and neighbourhood management teams/ partners in localities
 - o Develop a locality-based plan for the South with the aim that it has synergy with the Primary Care Network plan to tackle health inequalities
 - o Develop and co design training with Health teams that connects and upskills customer facing teams in localities
 - o Through the establishment of a data lab, incorporates specific learning activity and opportunities that pave the way for further development of the locality-based approach across Gateshead
 - o Recognise the importance of schools and the contribution made to the locality approach and locality working models are mapped to schools to ensure a network of wrap around support for schools to support integrated early help and prevention services which is easy to access and seamless

Background

2. The locality work we have done to date builds on the findings of Public Service Reform, lessons learned from Community Hubs, partnership working within our Children’s Centres and Thrive in Beacon Lough East. All of which identified the importance of de-centralising and placing essential support services into communities, the benefits of taking time to build trust with residents and partners and the need to challenge the systems, policy and process that keeps people out of essential services until their situation is critical.
3. The initial roll out of a locality team is underway in the South following the

appointment of Peter Allen the Strategic Lead for that area. Induction for the team has included significant relationship building with partners across the locality and beyond, engaging a wide range of voluntary and statutory sector partners in constructive dialogue around the benefits of locality working, including Elected Members, blue light services and early intervention. (Low Fell/ High Fell/Chowdene/Lamesley and Birtley wards)

4. Feedback from this early work illustrates how services are ready for a reinvigoration of local partnership working, often based upon existing good practice, and in full realisation that combined resource offers improved value for money, better results and more opportunity to achieve positive outcomes for the whole community
5. The south locality plan is in development and multiagency information sharing events took place in December 2022 and January 2023 that served to re-energise and focus locality working for partners. This activity includes a specific project funded by the Police and Crime Commissioner (Safer Streets) to address and prevent ASB focusing on the Birtley and Lamesley Wards. Learning and activity from this approach is now in development in other parts of the South.
6. The Safer Streets project is serving as an excellent opportunity to showcase the benefits of structured locality partnership working and partner services have openly welcomed the move to a more localised, asset-based approach.
7. At an operational level, colocation of services has commenced in the south of the borough with a range of services now operating from both the Birtley Library and Wrekenton Hub. These include the South locality team, housing, Police, Citizens Advice, Mental Health Social Prescribers and a range of VCS partners.

To build on this work it is proposed we create a Locality Programme to provide greater corporate ownership and oversight of locality working

The aim of the Locality Programme will be to drive transformational change across the Gateshead system to:

- Reduce inequalities; deliver the outcomes set out in the HWB Strategy for Gateshead, tackling vulnerabilities within our communities and to enable more sustainable outcomes for residents; and
- improve the standard of places and enable communities to be more resilient; and
- create a new operating model for all council services, de-centralising the services needed to support residents to Thrive; and
- embed more effective ways of working, to identify budget alignment efficiencies, and reduce demand on high intensity, high-cost services.
- Measures and data for the evaluation of the programme will be in place which will include the Family hubs measures of success.

Next steps

8. Key activity needed to support the programme of work is as follows:

- The Early Help Service currently provides a cross-borough, peripatetic family support

service and have agreed to adopt a locality-based approach to supporting families (ie) begin a phased timeline from February/March 2023 to link frontline practitioners to families residing in specific post code areas. This will enable Early Help colleagues to deepen understanding of/build improved relationships with local assets, including housing, health, schools and VCS networks. A codesigned plan for the delivery will complement this approach with a programme of activity that supports services/partners including early help, housing neighbourhood teams and neighbourhood management to develop shared objectives and ways of working in localities.

- This work would support the implementation of Family Hubs (2023-25) and the proposed model of aligning Hubs with VCS assets in our wards of highest deprivation. The Local Authority aims to utilise elements of Family Hubs funding to develop capacity with VCS partners and develop a 'Hubs and Houses' approach with a locality-based system of help. This element will support the development of the locality working model across the Borough to support an increase in the capacity of voluntary and community sector.
- The Locality programme will be designed to support the building of relationships across teams, and partners families and schools with a focus that has both practical benefits with timescales that support the whole team to have a locality focus. This will build on the work in areas for example TIBLE/ Edberts House and our Lottery supported partners where voluntary sector services are working alongside Council services and partners jointly – experience shows these teams are acutely aware of very localised issues and pressures on communities and the programme would be designed to give these teams an opportunity to effectively influence.
- The programme would be designed to provide the tools and mechanisms to encourage joined up working and develop the links with wider opportunities
- Learning and challenge will be built into the programme and form an integral part of the activity to inform future developments at both operational and strategic levels
- This approach supports the key aspects of locality working namely “community development” and “community-based working”. It will pave the way for the development of ‘locality teams’ and a culture which responds to and delivers against the needs of the resident.
- Develop the links between schools and locality working has commenced in the South
- In collaboration with health partners and others we will develop locality-based plan for the South with the aim of having synergy with the Primary Care Network plans and the outcomes of the Fuller Stocktake Report as well as Community Mental Health Transformation plans; both with the fundamental aims of bringing care and support closer to communities, being more person centric and addressing health inequalities – the principles of which are capable of being rolled out across the borough.
- At a local level this work is already aligning with the Community Mental Health Transformation (CMHT) programme and The Learning Disability and Autism 3 Year plan where it has been identified there are many co-dependencies and opportunities to add value such as, co-location, targeted investment, and most importantly better outcomes for people and local communities. Evidence tells us that good mental health and wellbeing is seriously impacted by the wider social determinants of health; bringing locality working, Family Hubs, PCN development together with CMHT will be a massive

step towards holistic community-based support to people and communities. An overview of the CMHT programme and key successes to date can be found in Appendix 2.

- We will develop a core training programme with system partners that connects and upskills customer facing teams in localities regardless of who their contract of employment is with.
- Develop key measures that set out a baseline of data metrics from which locality working will improve upon.

With such a complex agenda, success will be dependent on creating buy in, ownership and the engagement of staff members to be part of it, help the activity evolve and ensure it remains a sustainable way of working which continues to deliver the benefits it was set out to achieve and more.

Scope and wider strategic impact

9. The programme outlined above will need to consider the development of locality working alongside other related opportunities for inclusion in the initial programme linked to wider potential strategic priorities including:
 - **The role of place focused services in a locality services operating model:** the focus to date has been mainly on people / household focused support and prevention, not least to support the Council's Thrive ambition. However, locality working could offer opportunities to provide place focused services such as environmental maintenance and protection, 'street scene' services, transport, community development and safety in a more joined up, effective and efficient manner. The Place Standard recognises the impact of place quality on individual health and wellbeing.
 - **Customer contact and digital strategy:** a financial driver for locality working is early intervention and prevention leading to less costly intervention in service delivery. Equally there are potential efficiencies through promoting greater 'self-serve' opportunities and a different approach to customer contact for 'transactional' service requirements. Both locality working and customer contact need to be considered as potentially complementary. One is a least cost service option, the other prevents, mitigates or reduces costs.
 - **Corporate asset strategy:** spaces and buildings need to support locality working, but also need to be considered alongside the Council's need to rationalise its current building assets and reduce costs. There is potential to consider cost savings by reviewing the whole public sector estate in Gateshead, identify future 'whole system' requirements and potentially 'pool' building assets and costs accordingly.

Collaboration

10. The development and delivery of the programme has been supported by the involvement, contribution and work of officers/ partners from services right across the Council, the Health Services, the Voluntary Sector and the Police.

Recommendations

11. Views of the Corporate Resources Overview and Scrutiny Committee are sought on the Locality programme as outlined in Appendix 1 with next steps and proposed timescales identified.

Contact: Neil Bouch Ext 5303

APPENDIX 1 – Terms of Reference

Locality Working – A system wide partnership approach to include a new operating model for council services

Background:

This work builds on the findings of Public Service Reform, lessons learned from the Community Hubs, and Thrive in Beacon Lough East all of which identified the importance of de-centralising and placing essential support services into communities, the benefits of taking time to build trust with residents and partners and the need to challenge the systems, policy and process that keeps people out of essential services until their situation is critical.

Aim:

The initial aim of the Locality Programme is to help drive transformational change across the Gateshead system to:

- Reduce inequalities; deliver the outcomes set out in the HWB Strategy for Gateshead, tackling vulnerabilities within our communities, to create deeper more sustainable outcomes for residents
- Improve the standard of places and enable communities to be more resilient
- create a new operating model for all council services, de-centralising the services needed to support residents to Thrive
- embed more effective ways of working, to identify budget efficiencies, and reduce demand on high intensity, high-cost services.

Purpose of the Locality Programme:

Is to further develop, promote and enable shared purpose and partnership across Gateshead, maximising our collective impact (as far as we are able) by bringing together the thinking, amenities, shared resources/ costs and localised budgets of locality working, family hubs, mental health hubs, learning disability and autism hubs.

The Locality Programme will:

- Demonstrate practical cross-Council ownership of this corporate priority.
- Report progress to CMT and Leader's meeting to ensure oversight and necessary progress.
- Oversee the implementation plan/timeline to set out the steps needed

to achieve locality working

- Consider actions to address strategic and operational issues uncovered by locality working to date to include but not limited to lack of skills and capacity: need for systems redesign, data analysis, project and programme management, organisational development.
- Data evaluation and learning, using data to proactively approach people rather than waiting for people to present, considering key corporate learning points to inform other corporate priorities.
- Recommend more efficient and effective ways of working and service redesign where appropriate.

Methodology for locality working:

- Take a preventative approach by targeting those areas most in need informed by data including LION data (Local Index of Need)
<https://gis.gateshead.gov.uk/gatesheadmaps/IMD/app.html>
- Collaborative approach, partners share budgets, assets, resources and risks.
- Creation of locality plans to agree local priorities, resources, and budgets and shared costs.
- Anchored in communities, agile and flexible responding to client need.
- Collaborative to include health, VCSE, criminal justice, education, training and others.
- Enhanced community engagement, better and more often.
- A refreshed community leadership role for Members.
- Systems thinking approach to locality working and subsequent systems change.
- New activity measurement / metrics.
- Zero based budgeting approach – council focused.
- Form follows function organisational redesign – collaborative redesign.
- Application of agreed change management policies and procedures
- Delivery of a communications plan.
- Create a risk register and undertake regular review of risks and issues.

Working principles of locality working:

- Trusting relationship with partners and residents take time to build, and a second to damage
- Not council led, but council facilitated
- Increased community engagement, parity in relationships and local decision making
- Wide staff, trade union and Member engagement
- Recognition that operational change requires some staff to be released from the 'day job' for significant periods of time
- Partner engagement via VCSE, health, education, and training networks
- Regular communications and awareness raising
- Implementation of better, more effective ways of working (processes, systems, policies, and job roles) will drive efficiencies

- Wide ranging organisational change is inevitable

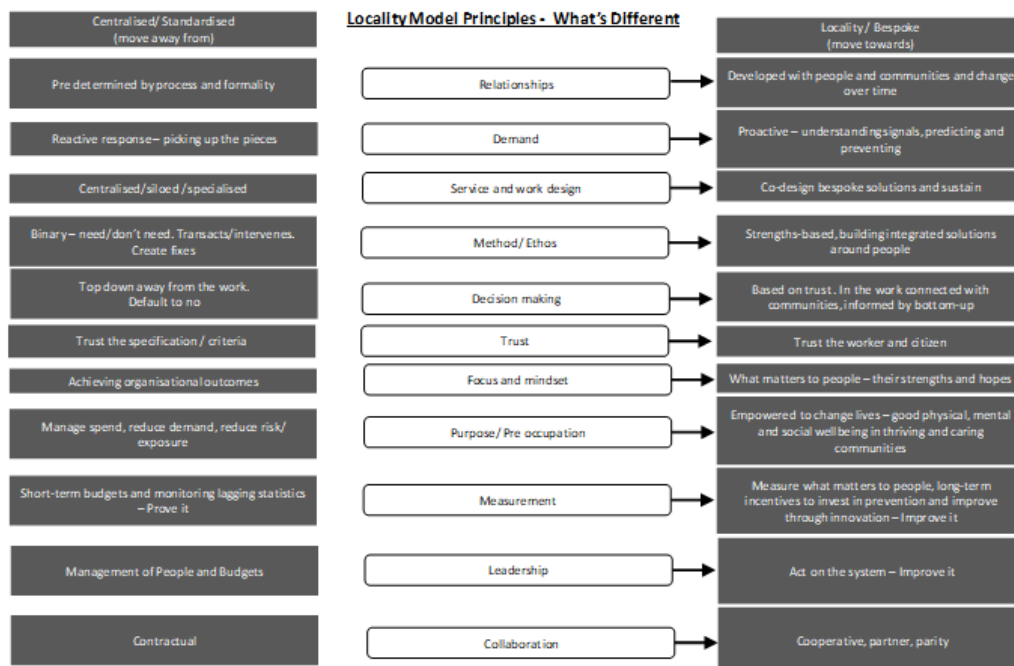
Programmed activity and proposed timescales:

Activity	Lead	Date
The Locality team in the South will be in place by end of December 2022.	Neil Bouch	Complete December 2022
Develop the Safer Streets initiative in the South (Birtley and Lamesley) with the engagement of local members	Peter Allen	Development completed. Programmed in place to run from January 2023 to December 2023
Develop strong working links with local elected members in the South to ensure local issues are at the forefront of delivery and engagement.	Peter Allen	From January 2023
Recruit a project management resource for a 12 month period to support coordination of the programme and support alignment with other programmes including People at the Heart. This post is subject to re advertisement.	Neil Bouch	By end of April 2023
Co-design a locality shared purpose and objectives with operational teams (Initial scope includes neighbourhood housing teams/ neighbourhood management/ early help teams and mental health transformation partners	Peter Allen	From March 2023
Via the Family Hub and Spoke approach support the development of the locality working model across the Borough that increases capacity in the voluntary and community sector. Including a mapping of the community assets.	Gavin Bradshaw/ Peter Allen/ Gary Carr/ VSCE partners	From March 2023
Implement a locality-based approach to supporting families (ie) to link frontline practitioners to families residing in specific post code areas/ aligned to neighbourhood housing arrangements	Gavin Bradshaw	From April 2023
Develop the links between schools and locality working – starting in the South	Peter Allen Suzanne Dunn	April 2023
Development of the South locality plan with alignment across partners and services	Peter Allen	May 2023

Commence a programme that supports services/partners including early help, housing neighbourhood teams and neighbourhood management to develop shared objectives in localities.	Gavin Bradshaw/ Peter Allen/ Gary Carr/ Gail Ballance	June 2023
Establish the learning approach for Locality working by end of March 2023 and embed the activity at both an operational and strategic level by end of September 2023	Mark Smith / Charlotte Wainwright	September 2023
Set up measures and data for evaluation and iteration of the locality programme	Mark Smith / Charlotte Wainwright/ India Gerritsen	September 2023
Develop the strategy to roll out the locality working model across Gateshead	Neil Bouch/Peter Allen	January 2024

Other items to add to the programme include:

- Consult with CMT and wider stakeholders on boundaries and the impact on services provided by health and education providers, including opportunities for alignment, avoidance of duplication. Importantly we recognise that organisational boundaries should not inhibit how/where support can be provided to residents.
- Align the Family Hub model to the broader locality model to support the “whole family / all age” approach.
- Identify the key opportunities for shared approaches/ resourcing that arise from the Family Hub model and incorporate these into locality development including the hub and spoke activity in community settings across Gateshead with the support of the VCS.
- Develop training that connects and upskills customer facing services (with support from HR / workforce development and linking with Angela Kumar (ICB) regarding a system wide approach) (timescale tbc)
- Based on the locality model continuum an organisational design and development exercise is required to ensure that the model is fit for purpose, with the right roles delivering the right services, at the right time, with the correct structure in place which enhances day to day team, individual and Council performance. This will include a full people impact assessment and a transformational programme of change management and process redesign (timescale tbc)



Issues:

- Successful delivery is dependent on corporate commitment and commitment to change
- Infrastructure to begin implementation in the first roll out area is in place
- Infrastructure to support the roll out further will need to be identified from within existing resources
- Identification of resource for support functions to ensure that the work required to enable the locality model and the transformational change is supported when it's needed
- Our understanding of communities and how these correlate (or rub up against) council, PCN, and Ward boundaries will need to be shared and understood.
- There is a need to address any required skills and capacity gaps: to ensure systems redesign, data analysis, project & programme management, and organisational development
 - Culturally we need to change what we value and label as productive - building trust and has the power to change a life.
- Community engagement methods, there is a need to listen more and agree priorities and ultimately budget locally

Appendix 2 – Community Mental Health Transformation, Learning Disability and Autism and Locality Working

Significant work has been done with community partners, stakeholders and people to begin to develop a way of work that will ensure shared values and vision of community and locality working.

The priorities for Year 2 of the CMHT programme are

Continue to support the integration of services & teams across the primary care footprint to join up the system and improve care & support to individuals

Residential Accommodation Review & Links to Mental Health Rehabilitation

Developing an enhanced offer across the Crisis Pathway, including Alternatives to Crisis Services

Developing an offer for Individuals Experiencing Complex Emotional Needs

Addressing Inequalities

The expansion of the CMHT workforce, has created over 30 new roles which work within the PCN areas. Wherever possible we will work on a locality and PCN footprint to bring teams and people from different organisations together. The aim is to establish a collaborative and co located way of working. Some of the new roles introduced are.

7 PCN Mental Health Practitioners

5 Mental Health Community Development workers

10 Peer support workers

5 Children & Young People Trainee MH Practitioners

2 Children & Young People CBT Therapist's

CBC Extended Access Mental Health Practitioner Pilot

2 Children & Young People Mental Health Practitioners

A key priority is System Integration, to enable this we are developing a systemwide training offer that will include a platform where information from different organisations can be shared with staff as part of their inductions. A clearer more structured induction programme is also being developed, where new staff get offered a proper induction and understand what their roles are, and how they fit with providing support to the whole of the Gateshead system. This programme will not specifically focus on MH, it will include staff working with and supporting our Learning Disability and/or Autistic population. The offer will be to embed MH into the 5 new Autism Hubs to provide a pre and post diagnosis offer, joining up with the Family Hub and Locality work streams to create holistic support for the people in Gateshead.

Other work across health and social care includes creating easier pathways for accessing suitable housing and support, a review of the current Mental Health

Concern Beds, and a review of the Older Person's MH pathway to increase the ability to access community support to enable people to live in their own homes and the community is underway with partners. Accommodation and support linked to Housing Strategy and developing future accommodation is taking place, as well a Fair Cost of Care Exercise and introduction of new contracts for 18+ adults for residential care provision.

The Crisis Pathway

A 12-month pilot of 8 crisis beds (4 male, 4 Female) to avoid admission to hospital is in place with MHC (within 6 months, the pilot has avoided 13 potential hospital admissions).

We are working with CNTW to develop safe haven/crisis café accommodation, to create an alternative to people attending A&E and offer timely support to keep people at home and access the support they require.

There is a CYP Pilot post crisis with Northeast Counselling Services to support young people who may have recently attempted to take their own lives. (The initial evaluation has found that we have been able to support 15 young people). Other CYP work includes a full review of the Single Point of Access, due to an increase in referrals in and significant wait times for treatment from both the Getting Help and Getting More Help Service, an evaluation will be completed to understand the reasons for the increase and to identify solutions to reducing pressures on the system. Some early evaluation has identified that services need to join up more, especially with Primary Care.

Inequalities work

Community Mental Health Transformation

- Pilot work with Atypical Support and Tyneside Mind to address inequalities autistic adults face in accessing Mind services
- Deep dive work with South Tyneside & Sunderland Trust to understand why take-up of the IAPT the service is low
- Deep dive work with NRASS to understand and address inequalities faced in accessing mental health services by the deaf community

Learn Disability and/or Autism

Health inequalities is a core theme within the 3-year Learning Disability and Autism Plan with a focus being around parental health as raised by the insights network. We are in the process of developing a women's Living Support Network to support up to 9 individuals with learning disabilities around equal access to health services, sustaining tenancies and addressing gendered health inequalities.

We will launch a 2-year grant scheme for organisations who support carers who themselves have additional needs, including learning disabled and autistic carers.

Gateshead System is in the process of developing Autism Hubs to offer support to parents and carers of autistic children across the Gateshead borough. This model will offer pre and post diagnostic advice and support through 1-1 sessions, drop-in, parent and carer support groups, an online platform and workforce development for the wider system.

Working with People @ The Heart

QE A&E Frequent Attenders

System Mapping to understand Need & Impact

Dual Diagnosis – Working with public health on Drugs & Alcohol

Trauma Identified as a System Training Need

To ensure that we can enable the system and partners to work together effectively we will continue to bring people together to enable the opportunity to network and share practice and improve system working through events such as the recent MH Conference. To ensure that we continue to complete the work we will measure ourselves the NHS Roadmap.



NHS
North East and
North Cumbria

By 2023/24 - Priorities for Community Mental Health transformation



				Dedicated focus ⁶		
Model development	Care provision	Workforce	Data & outcomes	CEN / 'personality disorder'	Community rehab	Eating disorders
Joint governance with ICB oversight ¹	'Must have' services ³ commissioned at PCN level tailored for SMI ⁷	Recruitment in line with indicative 23/24 MH workforce profile	Record access data from new model (inc. primary, secondary and VCS orgs)	Dedicated function linked to core model: increased access to dedicated function and consultation, support, supervision and training to core model		
Model design coproduced with service users, carers & communities	'Additional' services ³ commissioned at PCN level tailored for SMI ⁷	Expand MHP ARRS roles in primary care	Interoperable standards for personalised and co-produced care planning	Embed experts by experience in service development and delivery		
Integration with primary care with access to the model at PCN level ²	Improved access to evidence-based psychological therapies	Staff accessing national training to deliver psychological therapies	Routine collection of PROMs using nationally recommended tools	Development of trauma-specific support, drawing on VCSE provision	Ensure a strong MDT approach ⁸	No barriers to access e.g. BMI or weight thresholds
Commissioning and partnership working with range of VCSE services	No wrong door approach means no rejected referrals recorded	Multi-disciplinary place-based models ⁶ in place	Waiting time measured for CMH services (core & dedicated focus areas)	Co-produced model of care in place to support a diverse group of users	Clear milestones are in place to reduce reliance on inpatient provision ⁹	Early intervention model (e.g. FREED) embedded
Integration with Local Authority services	Tailored offer for young adults and older adults	Staff retention and well-being initiatives	Interoperability for activity from primary, secondary and VCSE services		Co-produced care and support planning is undertaken	Clear arrangements in place with primary care for medical monitoring
100% PCN coverage for transformed model	Principles for advancing equalities embedded in care provision	Dedicated resource to support full range of lived experience input	Impact on advancing equalities monitored in routine data collection		Supported housing strategy delivered in partnership with LAs	Support across spectrum of severity and type of ED diagnoses
Shift away from CPA towards personalised care	Support for co-occurring physical needs & substance use	Staff caseload ratios to deliver high quality care				Joint working with CYP ED services including transitions
Alignment of model with IAPT, CYP & perinatal	Trauma-informed & personalised care approaches	Place-based co-location approaches				Accept self-referrals, VCI referrals and Primary Care referrals

For any further information related to Community Mental Health Transformation Programme or the Learning Disability 3 Year Plan, please contact.
Mental Health, Learning Disability and Autism Portfolio Manager Angela.Kumar@nhs.net
Mental Health, Learning Disability and Autism Project Manager gail.ballance1@nhs.net
Associate Director Gateshead Place kirsty.sprudd@nhs.net